

Free Tear-Out Coloring Page!

November 2016

Plus
A Sample
Day of
Delicious
Meals
p. 45

Eat Clean, Lose Weight

Readers Share Their
Success Stories

**Have They
Found the Cure
for Cancer?**

**Smart
Solutions for**

- * Sugar Cravings
- * Back Pain
- * IBS



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Make the Most of Your Meals

Six dishes big enough to feed a hungry holiday crowd or cook once and eat all week.

By Khalil Hymore

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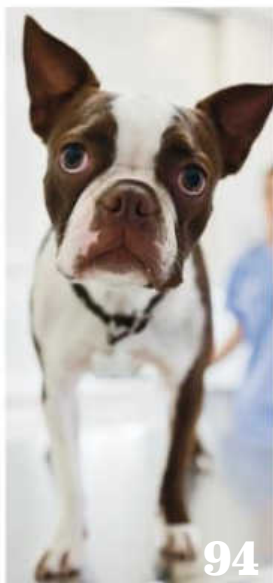
Diabetes in the Family

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FROM LEFT: DAVID MALOSH, ROBERT DALY/GETTY IMAGES, JASON VARNEY

All Yours

READERS' YESTERDAY.

Rone of our mailboxes hit “full” and would not accept another e-mail. (We’ve since made room.) Your response to my call for comments has been intensely gratifying. You tell me you’re happy with the ad-free model. You mention you’d like to see more men (turn to “Eat Clean, Stay Lean,” p. 42, and “Diabetes in the Family,” p. 86). And you note that you enjoy seeing yourselves—your real-life words, faces, physiques, even coloring-page artwork—in our pages.

One of the first things I did when I arrived was to invent more ways to connect with you. Here’s another: Do you have a decisive moment in your life story to share with us? Send your “mini-memoir” in 200 words or less and we might ask you to expand it for our Personal Journey column. Written in the first person, Personal Journey highlights a turning point, a moment of triumph after a struggle large or small: One woman commits to living mindfully



after a breast cancer diagnosis (in our October issue); another woman’s innovation gives widows a way to confront their grief (p. 34). I believe that within your inspiring tales lie seeds of the health and happiness we all seek. Submit your story to *readerstories@prevention.com* with “Personal Journey” in the subject line. And write to me at *barbara@prevention.com*.

Our Natural Legacy

I attended the 70-year-old Rodale Institute’s annual Organic Pioneer Awards a few weeks ago on the spectacular grounds of its 333-acre working farm. Honoring scientists, farmers, and businesspeople devoted to organic living, the awards are a public demonstration of the institute’s groundbreaking efforts. It was a strong reminder that *Prevention*’s heritage is at our country’s heart, truly the best of America. For more information about the institute and its work, see rodaleinstitute.org.



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Editors' Picks

Celebrate the holiday baking tradition with handcrafted kitchenware that will last a lifetime. Find these items at shop.prevention.com.



Let Them Eat Cake

"When I take time to bake a cake, I want the presentation to match the effort. This hand-pressed glass stand makes cakes look beautiful, no matter any frosting flaws."

Sarah Toland, food and nutrition director

Mosser Glass Pedestal Cake Stand (\$48)



Serve Sides with Flair

"I'd never seen a baking dish with such unique handles, but they make it so easy to lift and serve. Plus, the dish is so stylish, you never have to replate food for a holiday table."

Anthony LaSala, photo director

Maggy Ames Oven-to-Table Baking Dish (\$78)



Gift and Go

"These stamps are a fun way to get children involved in baking and gifting cookies. And they look so pretty in a tin or on a serving plate."

Lindy Speakman, research editor

Brown Bag Designs Handmade Embossed Cookie Stamps (\$32 for 2)





Letters to the Editor

Your comments on the September issue

THE UPS AND DOWNS OF WEIGHT LOSS

I lost 90 pounds for the second time about 10 years ago and have kept it off. I'm living proof that it's a hard battle and if you follow the recommendations in this article, you have a fighting chance. I've shared the story with a great many people.

Tracey Turner /
Tehachapi, CA

I laughed out loud. Smoothie of the Month, 15-Minute All-Organic Meal, and the sports drink recipes are already ripped out and on my kitchen counter.

Audrey Puzzo /
Bethlehem, PA

PROBLEM SOLVED

I was surprised to see that massage and acupressure were not

mentioned as migraine treatments. As a licensed massage therapist, I've cured a few of these with acupressure. No drugs, no side effects!

Jany Sabins /
Maplewood, NJ

MORE RECIPES

Since *Prevention* is a magazine that puts health first, I don't understand why your recipes are not more vegetarian, vegan, or whole-food, plant-based. Studies show that a plant-based diet can prevent and even reverse disease.

Michelle Desmarais /
Ottawa, ON

I felt the old format was a waste of money. Now I look forward to reading the new *Prevention*, especially Pets, Dr. Weil, the great recipes, and the

HUMOR

I have to tell you how much I liked the September issue. Judith Newman's "I Can Hear You Now" about hearing loss was so much fun

CONNECT WITH US

Send your comments to letters@prevention.com. We may edit letters and use them in all print and electronic media. Send us your stories and your coloring page (the "work"). Send your personal story to readerstories@prevention.com. To submit artwork, visit prevention.com/art-submissions. For all submissions, please include your full name, address, e-mail, and phone number. We regret that we cannot acknowledge or return work. Must be US resident and at least 18. By submitting your work, you agree to grant Rodale Inc. permission to use the work worldwide for any purpose, including promotional purposes, in any form of media.



Coloring page submitted by Patti Ivie of Seneca, SC. Find more to color on p. 96.

helpful suggestions on healthy foods.

Louise Swider /
Florence, MA

ART THERAPY

The art page is fabulous. It is addictive in a very positive way.

Sherri Holland /
Warwick, RI

LONGTIME FANS

I subscribed to *Prevention* when I was a college freshman more than 30 years ago. It was in black and white and packed with current and useful information about health. Eighteen months ago, I summited Mount Kilimanjaro. I

owe this to sticking with my passion for healthy living—*Prevention* provided this foundation in my formative years.

Shelly Moore /
Montville, NJ

I have always loved the compact size. Now that the magazine is ad-free, it couldn't be better!

Elizabeth Lewis /
Toronto, ON

BOLD CHANGES

We readers want substance and not always

glitz. Thanks for being bold enough to make a change.

Carolyn Carr /
Yorba Linda, CA

I was on the verge of ending my decades-long subscription because of the short, almost glib non-articles. Then the new magazine arrived. Thank you for the in-depth and thoughtful articles, recipes, emphasis on organics, and no ads!

Ruth Bennett /
Sterling Heights, MI

Share Your Opinion with *Prevention*

Let us know what you're thinking in short surveys, be the first to know what's new, and win prizes! For more information and to sign up for the *Prevention* reader panel, visit prevention.com/readerpanel.



Pulse.

NEWS, IDEAS, AND EXPERT ADVICE FOR YOUR HEALTHIEST LIFE

GENIUS SPICE

Cinnamon might make you smarter, according to researchers at Rush University, who have been studying the spice for years. (Earlier research showed that cinnamon can help slow the progression of Alzheimer's.) The latest study finds that cinnamon helps animals learn better; the scientists believe their results will be true for human learners, too.

A tall, clear glass filled with a thick, light-brown smoothie. A cinnamon stick is tucked into the top of the smoothie. The glass sits on a rustic wooden surface. In the foreground, there are scattered almond flakes and a few almond halves. A dashed white arrow points from the top left towards the cinnamon stick.

**SMOOTHIE OF
THE MONTH**

CURB YOUR CRAVINGS

Fight the urge to over-indulge in tempting sweets this time of year by using the latest nutritional know-how.

The key: choosing foods that are both filling and satisfying.

In this smoothie, apple cider vinegar and cinnamon stabilize blood sugar to dull a sweet tooth, while apples and oats, both high in slow-digesting fiber, promote fullness.

Almond butter has satiating protein and monounsaturated fat, shown to reduce belly fat, says registered dietitian Frances Largeman-Roth, author of *Eating in Color*.

BINGE BUSTER SMOOTHIE

Blend until smooth:
¾ cup unsweetened almond milk; ¼ cup oats;
1 Tbsp almond butter;
1 tsp apple cider vinegar;
1 tsp cinnamon; and
1 apple, chopped.

Rethinking Drinking

While researchers have long asserted a strong link between alcohol and cancer, some are now doubling down on that claim. In the journal *Addiction*, Jennie Connor, a professor at the University of Otago in New Zealand, concludes that alcohol “causes cancer” in seven areas in the body, including the liver, colon, and female breast. Based on years of data, the review is in line with the International Agency for Research on Cancer, which found that even light drinking, defined as consuming fewer than two drinks a day, can increase a woman’s breast cancer risk, in part because alcohol boosts hormones. Most doctors agree that women should limit drinking to 5 oz of wine, 12 oz of beer, or 1.5 oz of liquor per day.



1/3

The proportion of antibiotics prescribed in the US that are unnecessary (like taking antibiotics for a cold), per a recent study in *JAMA*

YOU ASKED

Q

Can probiotic supplements help me lose weight?

ANSWER: Supplementing with probiotics can help you slim down, especially if you take more than one strain for 2 months or longer, according to research in the *International Journal of Food Sciences and Nutrition*. While the review didn't look at which strains are best, lactobacillus (*Lactobacillus acidophilus*, *L. casei*, or *L. plantarum* on product labels) has the most research on efficacy. Look for products like Nature's Bounty Ultra Strength Probiotic 10 and Nature Made Digestive Probiotics Daily Balance (shown below), which have lactobacillus and third-party testing to prove they contain the bacteria promised.



NATURE'S BOUNTY
(\$22 for 60 count)



NATURE MADE
(\$21 for 30 count)

YOUR BRAIN ON MARIJUANA

As the use of medical marijuana continues to grow, scientists are finding more preventive and therapeutic roles for the drug. The latest: Researchers at the Salk Institute for Biological Studies have discovered that compounds in marijuana may slow the progression of Alzheimer's disease. While previous studies have found that THC—an active compound in marijuana—may help curb dementia symptoms like agitation, apathy, and delusion, the new Salk Institute work shows that marijuana may stave off Alzheimer's by reducing brain inflammation and amyloid beta, a protein that forms the hallmark plaques of the disease.



♥ EDITOR FAVORITES

MINDFULNESS APPS WE LOVE



Buddhify

This \$5 app lets you customize

guided meditation sessions for 15 different parts of your day, like your commute or bedtime. Our editors say: "Contemporary and friendly, with soothing British accents."



Calm

This free guided meditation

app lets you choose what you see and hear during sessions that last from 2 minutes to almost 30 minutes. Our editors say: "Like having a portable therapist in your pocket."



Headspace

This free 10-session program

teaches you to train your mind for meditation in 10 minutes a day. Our editors say: "User-friendly and relatable—you don't have to have any experience with meditation."



SLEEP DOCTOR

The Beat Goes On

Instead of counting sheep, try listening to Debussy before bedtime. In a study from the *Journal of Alternative and Complementary Medicine*, older adults who listened to instrumental music recorded at 60 to 80 beats per minute for 30 to 45 minutes before bed fell asleep more quickly, stayed asleep longer, and felt more rested in the morning. Researchers say this tempo relaxes the nervous system while lowering alertness and increasing feel-good chemicals like oxytocin. What's special about 60 bpm? That's our approximate heart rate when falling asleep, so similarly paced music can help literally set your body's internal beat for sleep.

TUNES TO SNOOZE BY

- 1** "Weightless," Marconi Union **2** "China Love," Enzo **3** "Première Gymnopédie," Erik Satie **4** "Going Home," Izumi Tanaka **5** "How Can I Keep from Singing," Celtic Spirit **6** "Lullaby for Nola," Esmerine **7** "Opus No. 14," Dustin O'Halloran **8** "Awaken," Dario Marianelli **9** "Clair de Lune," Claude Debussy **10** "River Flows in You," Yiruma

Download individual songs from this Prevention-compiled sleeptime playlist, all with 60 to 80 slumber-inducing beats per minute, from Spotify.

YOUR BEST MOVE

4 Simple Exercises to Keep You Toned Through the Holidays

Pilates may seem gentle, but it's a great way to add muscle tone if you don't have a lot of time to exercise. "You don't need to do Pilates for hours a day to see results—even squeezing in a few simple moves at home 4 or 5 times a week can provide similar benefits," says New York-based Pilates trainer Chelsea Streifeneder, who created this toning routine. Perform as many reps as possible with good form and repeat the circuit twice.

1



LEG PULL-DOWN Start on hands and knees, wrists under shoulders and abs engaged. Lift right leg to hip height; hold 2 seconds. Using core, pull right leg slowly back down. Repeat with left leg. Alternate legs for 30 seconds.

2



SCISSORS Lie on back with legs extended over hips. Curl upper body up to grab left leg at ankle, calf, or back of thigh. Float right leg parallel to floor; keep legs straight. Pulse left leg twice into chest. Repeat with right leg. Alternate legs for 30 seconds.

3



SAW Sit with legs extended, slightly wider than hip-width apart, arms extended to sides at shoulder height. With hips stable, inhale, twist, and reach right hand to left foot. Exhale; hold 3 seconds. Return to start. Alternate sides for 30 seconds.

4



MODIFIED TEASER Lie on back with knees bent, arms extended overhead. Squeeze thighs together and curl upper body off floor, reaching arms forward. With abs engaged, slowly roll upper body back down to start. Continue for 30 seconds.



15-Minute All-Organic Meal under \$15

Healthy Ramen

SERVES 2

Cook 8 oz cubed tofu in olive oil until browned. Set aside.



\$1.14

In pot, boil 4 cups reduced-sodium broth.



\$3.69

Add 3 oz dried ramen to broth; cook until soft, 2 to 3 minutes.



\$1.56

Remove from heat. Stir in 1 Tbsp miso paste.



\$0.38

Add leaves of 1 baby bok choy; wilt.



\$1.50

Add 2 oz shiitake mushrooms, sliced.



\$1.88

Divide in bowls. Top with tofu, fried egg, and minced scallions.



\$0.79

**Total:
\$10.94**

NUTRITION (per serving) 544 cal, 46 g pro, 57 g carb, 11 g fiber, 9 g sugars, 19.5 g fat, 4 g sat fat, 923 mg sodium

FROM TOP, LEFT TO RIGHT: PHOTOGRAPH BY JASON VARNEY; FOOD STYLING BY HADAS SWIRNOFF; PROP STYLING BY PAOLA ANDREA. IAN O'LEARY/GETTY IMAGES. MATT RAINEY (2). ETIENNE VOSS/GETTY IMAGES. MATT RAINEY. EDWARD WESTMACOTT/GETTY IMAGES. PHOTODISC. IMAGE SOURCE

FOOD TO FIX IT

Eat These,
Lower Blood Pressure

People who boost their magnesium intake to 368 mg per day—just above the RDI for adult women—for 3 months can lower their blood pressure by several points without making other changes, according to the journal *Hypertension*. Magnesium relaxes blood vessels, which increases blood flow, decreasing pressure. But approximately 60% of adults don't get enough magnesium. Foods are the best source of the mineral, especially these:

Pumpkin Seed Kernels

168 mg per 1 oz

Almonds

77 mg per 1 oz

Spinach

157 mg per 1 cup cooked

Avocado

58 mg per fruit

White Beans

113 mg per 1 cup cooked

70% Dark Chocolate

43 mg per 1 oz

Salmon

104 mg per 3 oz

Plain Yogurt

42 mg per 1 cup

Brown Rice

86 mg per 1 cup cooked

Banana

32 mg per medium fruit



16

Number of pounds the average Thanksgiving turkey has increased since 1930, when turkeys were 13 lb, compared with today's 29+ lb bird

GYM BEFORE KNIFE FOR KNEE PAIN

If you're considering surgery for persistent knee pain, you may want to try some simple exercises first. When middle-aged people with knee pain performed exercises that help strengthen the supportive muscles around the joints 2 or 3 times per week for 12 weeks, they reduced their pain as much as those who went under the knife, while improving their muscle strength as well. Discuss your options with your doctor before signing up for exercise or scheduling knee surgery.



BEHIND THE LABEL

Energy Patches

Caffeine has been called the world's most popular drug, but not everyone can drink coffee or tea without suffering an upset stomach or jitters. Caffeine skin patches claim to deliver the stimulant without side effects.

WHAT'S IN THEM? Red Star Energy has the caffeine equivalent of a little less than $\frac{1}{2}$ cup of coffee per patch and contains green tea and B vitamins. Clean Energy Patch has slightly less caffeine, plus ingredients like the botanical stimulants guarana and cacao.

DO THEY WORK? Getting caffeine through the skin into the bloodstream is not easy; one study found that most caffeine stays on skin's surface. If you're used to drinking several cups of coffee a day, $\frac{1}{2}$ cup more, delivered slowly over time, won't work miracles. But try a patch if you want extra energy and can't drink coffee or tea.

FROM LEFT: ERIK ISAKSON/GETTY IMAGES, JASON VARNEY. PATCH BY JESSICA KUSUMA

Your Body on an Argument

Occasional disagreements are healthy for relationships, but frequent fighting can throw the body out of whack, contributing to detrimental physical and mental side effects.

VOCAL CORD DAMAGE

Yelling or even speaking loudly can result in temporary hoarseness and produce lesions that can damage vocal cords and even lead to permanent voice loss.

STIFF NECK

Clenching your jaw and neck muscles during an argument can lead to neck pain.

HARDENING OF THE ARTERIES

Outbursts raise blood pressure, leading to atherosclerosis and increasing the risk of stroke.

BACK PAIN

Tension puts pressure on back muscles, leading to aches and pains, especially as you age.

WEIGHT GAIN

Arguing causes stress, triggering the release of cortisol (a hormone linked to increased cravings, overeating, and weight gain), particularly around the middle.

WEAK IMMUNE SYSTEM

Increased production of cortisol weakens immune cells, leaving you vulnerable to infection and illness.

ARGUE BETTER

1. EAT BEFORE YOU TALK.

Couples are more likely to argue aggressively when blood glucose levels are low.

2. STOP INTERRUPTING.

Refusal to listen creates resentment and may shut things down—a fast track to irreconcilable differences.

3. CHALLENGE YOUR

OPPONENT'S IDEAS, not your opponent: You want a constructive discussion, not a name-calling match.

Sources: PNAS, Emotion



Problem Solved!

Irritable Bowel Syndrome

BY RICHARD LALIBERTE

IBS is a common gastrointestinal disorder that appears in three forms: one that tends to constipate you (IBS-C), one that gives you diarrhea (IBS-D), and one that's a mix of both (IBS-M). The forms share other symptoms, such as gas, pain, and bloating. Experts suspect that several factors are responsible, including muscle contractions that

are too slow, fast, or spasmodic and glitches in the nerves that transmit signals between the gut and the brain. Emerging research offers a new explanation: IBS can develop when segments of the small intestine become overgrown with unhealthy bacteria. This thinking adds new therapies to the list of ways to get your GI tract back on track.

**10
to
15%**

Proportion of adults with IBS, which affects women twice as often as men

ILLUSTRATIONS BY RAQUEL APARICIO

TRIED-AND-TRUE TREATMENTS

First-line remedies that experts endorse

1

Xifaxan

Approved by the FDA in 2015 for IBS-D, this antibiotic has become a front-line treatment for many doctors. “Rifaximin [Xifaxan] can provide dramatic relief by eliminating harmful bacteria in the small bowel,” says David Doman, a gastroenterologist in Silver Spring, MD, and clinical professor of medicine at George Washington University School of Medicine. The response to a 2-week course of the medication lasts anywhere from a few weeks to several years. The drug isn’t absorbed, so it stays in the gut as it works, which reduces systemic side effects.

2

Lubricating drugs

Medications like linaclotide (Linzess) and lubiprostone (Amitiza) increase fluid secretion in the intestines, helping bowel contents move more smoothly in those with IBS-C. One drawback is that the drugs occasionally work a little too well, causing diarrhea in 12 to 20% of users. A doctor can adjust the dose depending on the severity of a patient’s IBS, but if diarrhea continues to be a problem, a different treatment may have to be considered.

3

Antidepressants

Antidepressants can help the brain interpret pain signals properly and calm overactive nerves, easing pain, bloating, and constipation or diarrhea. Because of associated side effects, selective serotonin reuptake inhibitors (such as citalopram, fluoxetine, and sertraline) tend to be better for IBS-C, while tricyclic antidepressants (like amitriptyline and desipramine) appear to be better for managing IBS-D.

SURPRISING SOLUTIONS

Natural and unconventional approaches

1

Gut-friendly foods

A groundbreaking 2016 clinical trial found that more than half of IBS patients who were advised to avoid foods containing certain poorly absorbed, hard-to-digest carbohydrates had significant improvement in abdominal pain. Foods to avoid include apples, pears, cauliflower, garlic, onions, and wheat, which ferment as gut bacteria break them down, causing symptoms of gas, bloating, cramping, and diarrhea or constipation.



2

Probiotics

Populating the gut with probiotics, a type of good bacteria, helps keep the bad bacteria in check. In a research review, Doman and his colleagues cited preliminary studies showing that probiotics significantly improved symptoms in people with all forms of IBS. Another review of 16 clinical trials found the probiotic strain *Bifidobacterium infantis* 35624 (available over the counter in Align Probiotic Supplement) to be most effective.

3

Peppermint oil

“Studies show that peppermint oil relieves IBS better than some medications,” says Gerard Mullin, an associate professor at Johns Hopkins School of Medicine. Use enteric-coated capsules, which have a thin covering to keep the oil from being released in the stomach, where it can trigger heartburn. Take one or two capsules (0.2 mL of peppermint oil) two or three times per day.



WHAT'S NEXT?

New and noteworthy options

1

Emotional healing



Stress has long been thought to make IBS symptoms worse, so calming practices like meditation, walking, and yoga can be helpful. A new meta-analysis finds that psychotherapy can provide both short- and long-term relief for IBS sufferers. Though experts aren't sure how stress and IBS connect, they say a chronic state of alertness may alter nerve signaling between the brain and bowels or trigger hormone changes that affect the gut.

2

EnteraGam

Inflammation from an injury, an infection, or a chronic condition may make the gut's structure more permeable, providing easier access for toxins. EnteraGam is a prescribed "medical food" consisting mainly of beef protein that helps facilitate gut healing and promote intestinal immunity, Mullin says. Pilot studies find that mixing 5 to 10 g of the powder into liquids or soft foods each day can thicken stools and relieve symptoms like abdominal pain and bloating.

3

Antihistamines

Researchers have found some IBS-D patients have increased numbers of histamine-producing intestinal mast cells. Histamine, a compound responsible for allergic reactions, can also sensitize a pain receptor in the gut. Belgian researchers discovered that IBS-D patients who took an antihistamine for 12 weeks had significantly fewer symptoms than those in a control group. "I've seen patients who didn't respond to any other medical treatment gain relief from antihistamines," says Doman.



Dr. Weil

Should I consider a cortisone shot for back pain?

RESearch examining this question is contradictory. Cortisone is one of several corticosteroids—hormones that perform important functions throughout the body, such as reducing inflammation. A shot of a corticosteroid together with a numbing agent to the space between the dura (a membrane surrounding the spinal cord) and the vertebrae—called an epidural steroid injection (ESI)—may be recommended when oral anti-inflammatory drugs and physical therapy fail to relieve lower-back pain, pain from a herniated disk, or sciatica pain in the lower back, buttock, or

leg. Study results are inconsistent, but overall they suggest that ESIs are most effective for managing sciatica pain.

But ESIs are shrouded in controversy. The FDA has approved the agents in ESIs for other clinical uses but hasn't approved ESIs, saying effectiveness and safety have not yet been established. In spite of this, the injections are commonly used off-label—more than 2 million are given each year to Medicare patients alone.

One of the biggest concerns is the possibility of side effects.

Andrew Weil, MD, is founder and director of the Arizona Center for Integrative Medicine.

3 EXERCISES
TO HELP
PREVENT
LOWER-BACK
PAIN

Most data suggest ESIs are safe when given by practiced hands, but they can cause rare catastrophic outcomes such as paralysis, burning pain, and infection. Furthermore, because small amounts of the injected drugs enter the bloodstream, the steroids can also cause systemic effects, such as elevated blood sugar.

When an ESI is effective, the relief is rapid, which is why some patients opt for this procedure when they need a quick fix. But that relief is temporary; the shots do nothing for the underlying cause of back pain, meaning the discomfort is likely to return. The risks, coupled with the fact that the injections don't offer any curative effect, make ESIs a poor choice for long-term treatment. And because patients are typically advised to receive

no more than three shots in a year to help reduce the risk of adverse side effects, short-term relief is limited, too.

AVOID INFLAMMATION

Adding these natural anti-inflammatory spices to your smoothies, shakes, and stir-fries can ease back pain.



Of course, the best therapy for back pain is preventing it altogether. Maintaining ideal body weight, exercising regularly, and avoiding prolonged sitting can help.

As many as 80% of people will experience back pain in their lifetimes, but luckily it often responds well to hot and cold packs, stretching, physical therapy, and over-the-counter nonsteroidal anti-inflammatory drugs such as ibuprofen.

Other therapeutic options include massage therapy, acupuncture, osteopathic or chiropractic manipulation, eating natural anti-inflammatory foods, and breath work and meditation to reduce pain perception and stress. Surgery should always be a last resort. Fortunately, it's very rarely needed.



Knee-to-chest stretch

Lie on back and hug knees to chest, allowing lower back to round. Hold 30 seconds.



Press-up

Lie on stomach with elbows below shoulders and forearms flat. Lift chest, arching back slightly. Hold 30 seconds, breathing deeply.



Glute bridge

Lie on back with feet on floor. Press through heels to lift hips until spine is straight. Hold 2 seconds, then lower to starting position.



Dr. Low Dog

How do I make my own natural lip balm?

I'VE SPENT most of my life in the southwestern US desert, where the dry heat sucks the moisture out of my skin and lips. I started making soothing lotions and balms to protect myself and my loved ones before natural products were available in most stores. Many now carry organic and eco-friendly skin care products, but I still enjoy making small batches of lip balm for family and friends, as I have for more than 35 years. It's comforting to know you're using something that has only natural ingredients, instead of the preservatives and artificial colors and flavors contained in some conventional balms.

The recipe I use (at right) calls for supermoisturizing shea butter and almond oil. For a bit of flavor, I usually add peppermint essential oil, which is cooling to the lips. For

my husband, I'll make a batch with lemon essential oil; he loves the fresh zing. It works for him, but I always caution that compounds in lemon oil absorb light more intensely, possibly causing sunburn.

The first few times you make your own lip balm, I recommend the following test (once you're a pro, you can skip this step): Before you add the essential oil to the melted mixture, transfer a bit of the warm mixture to one of the small containers. Refrigerate about 10 minutes. If the chilled balm still feels mushy, add another ounce of beeswax to the large batch and heat until melted. If the refrigerated mixture has hardened nicely, you can move straight to adding the oil.

My recipe makes enough to fill 25 to 28 small tins, and the balm keeps for months—though ours never seems to last that long!

Tieraona Low Dog, MD, is a physician, educator, author, and internationally recognized expert in the fields of herbal medicine, integrative medicine, and women's health.



SOOTHING PEPPERMINT LIP BALM

Add 2 oz organic

cold-pressed almond oil,
2 oz organic shea butter,
and 1 oz grated beeswax to
1 qt Mason jar. **Fill** sauce-
pan approximately $\frac{1}{4}$ full
of water. Place jar in water
and begin to melt ingredi-
ents over gentle heat. Cook,
stirring frequently, until all
ingredients have melted,
then remove from heat.

Gently stir in 10 to 20

drops of peppermint
essential oil. (If this is for
kids or you have sensitive
skin, use less essential oil or
omit.) Use a turkey baster
to fill 1 oz tins or BPA-free
plastic containers (which
you can find at most craft
stores) with warm balm.
Leave tops off until balm has
cooled and hardened.

Piece of Cake

Annabelle Gurwitch

never stops trying to meditate, even when her mantra eludes her.

I WAS A teenager in Miami Beach when I had my introduction to meditation. These were the halcyon days before we'd heard the words *skin* and *cancer* used in a sentence together, so I was slathering on baby oil under a scorching sun when I heard a melodic sound coming from an oceanfront hotel.

Following the music inside, I found a gaggle of gorgeous hippies. They invited me to join them for a round of chanting in their pop-up ashram. They were so friendly I couldn't resist. Looking back, they were probably hungry and thought I might have snacks in my bag.

I stayed for only an hour because I had chemistry

homework to avoid doing at home. Brain science teaches us that mantra meditation can produce a dopamine rush, but all I knew was that when I sailed out of there, hair scented with patchouli incense, I felt like I was floating on a magic carpet.

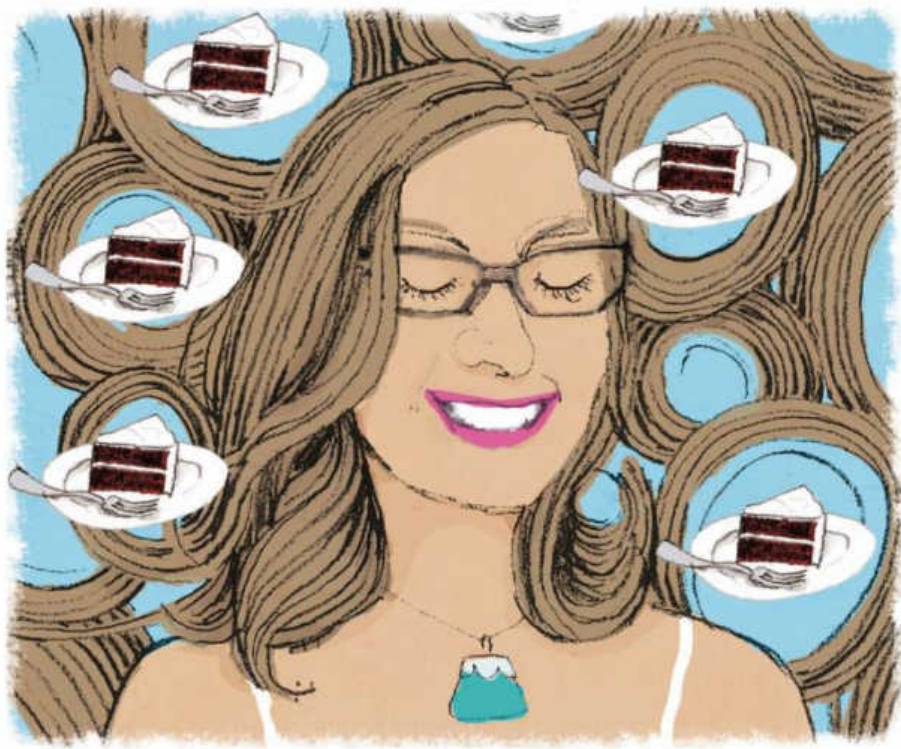
A few months later, I moved to New York City to attend college and discovered other techniques. For years, I sampled meditation styles like tapas.

I tried a taste of Zen at a center where legendary singer-songwriter Leonard Cohen was also a fixture. Just my luck, the monastery was located next to a quaint little French inn. The monks' strict discipline wasn't for me, but I sure did enjoy the most delicious crepes in North America.

I went to a bite-size retreat with the same guru who inspired Elizabeth Gilbert to eat, pray, and love her way into a best-selling career. Alas, that guru didn't have the same effect on me. She had such great skin that all I wanted was the name of her dermatologist.

I nibbled at guided meditations and even dervish whirling, but I was only grazing. Then last year, having moved to Los Angeles, I noticed that my attention span was the length of half a tweet. When





a friend mentioned a free lecture that promised a “brain tune-up,” I decided to attend. Some might say the universe was sending me a message, because I showed up on the wrong day. I’d missed the free talk, arriving instead at the start of an expensive 3-day tutorial.

Honestly, I would have turned around and left, but I’d gotten a great parking spot. In LA, only an earthquake or an offer to star opposite George Clooney in a film would make someone give up a good spot, so I forked over the absurd amount of cash and signed up.

The teacher told our class of 30 that we were going to learn a very simple

method for quieting the mind. “Practice doesn’t make perfect,” he informed us. “Practice makes for more practice.” My fellow students nodded, chuckling, while I suppressed a scream. I took that as a sign that I should start meditating stat! The teacher went around the room whispering individualized mantras into our ears, which he said he’d selected especially for each person. Then we sat for our first 20-minute session.

I closed my eyes and felt my breathing slow down immediately. A calm passed through my body, and I had one of those epiphanies you hear about people having when they begin to meditate:

I am really good at this. I am so great at this, I should teach this technique. I might be the best meditator in the world. I feel so refreshed. I am a new person. Exactly 2 minutes had passed.

What? I had 18 more minutes of this? I considered packing it in, but George Clooney hadn't called, so I stayed put. Afterward, I felt able to inhale more deeply, so I returned that evening for a second sitting. I surprised myself by completing the entire course.

I've kept this twice-daily ritual for the past 4 years. I'd love to report that I've gotten a direct line to enlightenment, but that's not the case. Sometimes a bit of wisdom seeps through, though it's mostly on the order of *Remember not to go to that dry cleaner where the clothes come back smelling like burned hair*. Regular meditation does afford me a 30-second delay before I yell at my cell phone when the signal drops, and sometimes I don't even curse at all. OK, that's an exaggeration—I am an inveterate curser. But it's progress, not perfection.

And I am clearly a work in progress. The inner monologue of a terrible meditator goes something like this:

*Why is it so hot in here?
Why did I put on a sweater?*

Oh, no, I'm not wearing a sweater. Note to self: Google whether yams are effective in stopping hot flashes.

I hate my mantra. What is my mantra? I wonder if the woman sitting next to me got a better mantra. What if I got a bum mantra?

Yam is a funny word. Yam. Yam. Yam, I'm hungry.

If I make it through this, I'd love a slice of red velvet cake. I just cut dessert out of my diet, but I really deserve a treat.

Neck is thrusting forward. Must work on posture. My grandmother lost several inches in height and ended up the size of a ladybug. Must buy calcium supplements and remember to take them.

Ladybugs are really cute.

If I can accomplish the same amount of relaxation in 10 minutes as other people can in 20, I won't need to sit for a whole 20 minutes, right?

You know what would be a good mantra? Red velvet cake.

Wait a minute...I feel something...tingling...Is this my Kundalini energy rising? No, that's my foot falling asleep.

It's been 19 minutes, but it's going to take at least a minute to stretch my legs out of this pretzel, so I think that should count as the last minute.

It's cake time! 🍰

“

Meditation does afford me a 30-second delay before I yell at my cell phone when the signal drops, and sometimes I don't even curse.

Mind Games

This debut column explodes common myth-conceptions about how the brain works.

BY SARAH KLEIN // ILLUSTRATIONS BY NOMA BAR

Thinking about the brain is a lot like contemplating the limits of outer space: So much lies outside our grasp that it can be dizzying—especially when some of our fondest-held beliefs are challenged and proved wrong. Even then, some myths live on, defying logic and proof, so persistent that they've earned their own name: neuromyth.

Neuromyths flourish because they seem to explain, albeit with dubious logic, otherwise bewildering phenomena. Even our educators may be misguided. In one study, teachers believed nearly 50% of common neuromyths, such as right brain/left brain pseudoscience. Here are some talking points to use when you're confronted with a myth-conception.

MYTH: Men's and women's brains function differently.

• **REALITY CHECK:** "Americans tend to think of women as being more verbally than mathematically adept," says clinical psychologist Cynthia Green, author of the *Prevention* book *Brainpower Game Plan* (Rodale, 2009). But when researchers compare academic performance



BRAIN

between the sexes in some Asian and European countries where stereotypical attitudes aren't as prevalent, women's math skills are easily on par with men's. While there are structural differences between men's and women's brains, they don't directly affect behavior, personality, or learning. A 2015 Tel Aviv University study published in the *Proceedings of the National Academy of Sciences* found that those differences don't even allow researchers to identify any given brain as male or female. "Humans and human brains are composed of unique mosaics of features," the researchers wrote.

• WHERE THE MYTH ORIGINATED:

Structural differences—for example, a band of nerve fibers called the corpus callosum that connects the two sides of the brain is thicker in women; men's brains tend to be larger overall—have less significance than was assumed until recently.

• **WHY IT PERSISTS:** If men are from Mars and women are from Venus, their brains *must* be different! Gender bias is getting the best of anyone who buys this one.

MYTH: You use only about 10% of your brain.

• **REALITY CHECK:** You may not use your entire brain when you're resting, for

example, but you don't have an untapped expanse of gray matter, either. "All of us use the entirety of our brains but not every part constantly or equally," says Stephen M. Kosslyn, a cognitive neuroscientist and author of *Top Brain, Bottom Brain: Surprising Insights into How You Think*. Some areas function automatically, such as the brain stem, which controls unconscious activities like breathing. Others control higher-level thinking and may be activated only when we're reasoning, planning, or solving problems. These are the regions famously thought to be "exercised" by crossword puzzles,



brain games, or brain-training software. Although research has found that cognitive claims for brain games are unsubstantiated, they persist as well, partly due to ingenious marketing efforts by the companies that make these products. In reality, there's no silver bullet to ward off dementia, and we need to approach cognitive wellness from all angles, Green says, including intellectual stimulation, regular physical activity, and a Mediterranean-style diet, which has been shown to be beneficial for brain health.

• **WHERE THE MYTH**

ORIGINATED: “The 10% idea may be based on a misreading of some data that was collected in the 1920s and '30s that showed rats could relearn how to run through mazes even after having large amounts of their brains removed,” Kosslyn says. Other researchers trace it to American philosopher and psychologist William James, who wrote in 1908, “We are making use of only a small part of our possible mental and physical resources.”

• **WHY IT PERSISTS:** Who wouldn't like to imagine a brain of nearly infinite capacity for brilliant ideas just waiting to be tapped?

MYTH: The right and left hemispheres of the brain operate independently and determine the “type” of thinker you are.

• **REALITY CHECK:** As neat and tidy as it is to claim sides—with creative people right-brained and logical folks left—both hemispheres work together. “When you scan people's brains as they do tasks, you don't see just one half light up with activity,” Kosslyn says.

• **WHERE THE MYTH ORIGINATED:** Back in the 1960s, researchers surgically separated the two sides of the brain and identified areas that governed functions like math and language skills. Differences were found between the two hemispheres, but the right brain/left brain paradigm oversimplifies the science. Today, experts believe the communication between the two sides likely facilitates our most

creative and logical thoughts.

• **WHY IT PERSISTS:** It makes pegging people easy. For instance, educators have relied on such faulty thinking to create learning strategies targeted at right- and left-brainers. Up to 91% of teachers believe differences in how individuals learn are due to the dominant side of their brains. As for the rest of us, personality quizzes would fall out of favor if we lost interest in knowing whether we are right- or left-brained and what our “types” are. No one's brain, though, is exactly like *your* brain—which can be as heady a concept as contemplating the cosmos. 

“
When you scan
people's brains
as they do
tasks, you don't
see just one
half light up.”

Mourning Becomes Her

Audrey Pellicano became a widow at age 37. Now her mission is to help other people cope with loss.

AS TOLD TO KERA BOLONIK // PHOTOGRAPHS BY ALLISON MICHAEL ORENSTEIN

I buried my husband, Joe, on Christmas Eve 25 years ago. He'd been diagnosed with leukemia 6 months after we got married. While he was sick, I never allowed myself to think about what it would be like to raise our four children alone, and we never spoke of his death. I didn't know what his wishes were for me or our children. Life without Joe was inconceivable, so I thought, *Why go there?* I just wanted to enjoy him and our family. And I did, for 7½ years.

We got married when I was 30 and he was 41. Around Thanksgiving of that first year, he had what he believed was the flu. But it kept dragging on. The women at his office and I told him, "This is not you. I think you should see a doctor." But he was a cardiologist, and doctors don't like to see doctors. Finally

he got blood tests, then a spinal tap. I remember watching him trying to comprehend his diagnosis. Even though we both worked in the medical field (I'm a nurse), we thought, *Miracles do happen*. We hoped having a family and being happy would lengthen Joe's life, and we had the first of our children the year

HAIR AND MAKEUP BY SIMONE SAINT LAURENT



"We had a wonderful short marriage, and I was left with four gifts," says Pellicano.

"But grief is a journey—and it hits you when you least expect it."



"We're never really taught how to lose," says Pellicano.

"It's always about acquiring more. So when loss comes, it's devastating."

How Talking about Death Might Save Your Life

On average, every death leaves behind four or five grieving survivors, and for most of them, the more extreme feelings will fade within 6 months, according to the National Institutes of Health's *News in Health*. Talk

therapy can help speed the healing process. "Talking about grief helps to normalize death and loss as human experiences," says Mary Sussillo, a psychotherapist and the director of New York City's Center for Bereavement.

"Sharing memories of loved ones helps bring the lost relationship alive, creating an often-needed sense of continuity while at the same time enabling the mourner to gradually face the reality of the loss."

after his diagnosis. Joe went to work every day. We had great vacations; we enjoyed our children. He bought cars and wine—he wanted to make the most of life. Even when we went to Manhattan to see his doctors, we'd eat at a great restaurant so we'd always attach a happy memory to the visit.

In Joe's final days, our two older children, who were 6 and 4 at the time, stayed with a friend. Deciding whether to have the kids with us while Joe was dying was very, very hard. No one had an answer for me—because, I realized, there *wasn't* a right answer. It was many years before I told them the exact date of their daddy's death because I didn't want to ruin their future Christmases. I didn't want them to have that association.

I remember being at the wake and funeral and feeling stoned. A friend brought clothes for me—I couldn't even choose. I remember being stoic.

I hated the whole process. After the funeral, I bathed my children, put them in their pajamas, and tucked them into bed. When I remember it now, I think, *How did I do that?* That's a scary thing when you're a young parent with four kids you're responsible for, especially with a 2-year-old and 3-month-old. But I had to. That January, I went to Florida with my kids and my mother—because it's sunny, you think that you're going to be happy, right? But I learned there's no way to run from grief. I was so deep in it.

Within the next year, I sold our home and moved closer to my parents because I needed extra pairs of hands. But my grief was alienating. I wasn't a wife anymore—that piece was missing—so who was I? I was a mother. I was my parents' child. I briefly went to a therapist, but he didn't have a lot of experience with young widows, so

But for some, grief can linger and even worsen. Roughly 15% of bereaved people are susceptible to what's called "complicated grief," according to research by Holly Prigerson, a professor of psychiatry at Harvard Medical School, and they may suffer a deep depression with symptoms like social detachment and constant sorrow, feelings of meaninglessness, yearning

endlessly for the dead, and even suicidal thoughts. Sussillo says this is another reason why talking is so important. When friends and family of the bereaved notice someone becoming "stuck" or "frozen" in her grief, they're more likely to recommend that she seek out additional help from a professional. "The finality of death is the biggest challenge," says Sussillo.

"It's overwhelming to accept that you will never see your loved one again." That conversation can be easier in the right situation. Sussillo says that in her experience, most people are eager to talk about their loss when they're in a safe, nonjudgmental environment.

To find a Death Café meeting near you, go to deathcafe.com.



*“There’s no way
to run from grief.
Speaking about
the unspeakable
makes you
stronger.”*

I stopped going. I did find a grief psychologist for my kids—even my 2-year-old went—because I recognized that I had no idea how a small child grieves. I meditated daily. And we all cried together—I never hid my grief, because I felt that kids need to learn that death is a part of life.

I tried a widows' group, and everyone there was my mother's or my grandmother's age. There was no one to say, "Boy, did I want to pull the covers over my head today, but I had to get out of bed." But whenever a woman's husband in my neighborhood died, I'd have her over and listen to her. It was cathartic, hearing other women my age saying the things I had thought and felt, especially when I felt like I was losing my mind.

Eventually, I started dating again. Now, at 63, I'm remarried. I started dating my husband when my youngest was 12 because I wanted companionship. It had been long enough that I wasn't replacing Daddy; we all knew there was no replacing Daddy.

Even though my life is full and rich, and my kids are wonderful adults now, death still plays a role. A few years ago, a friend of mine, a hospice social worker in Ohio, told me she was starting a Death Café, and I was intrigued.

Basically, it's a salon—a safe place to discuss death, a subject everyone's afraid of, over a meal or coffee. Death Cafés began in Europe about 10 years ago, and now more than 2,000 meetings have taken place globally. I thought there must be a Death Café in New York City—it's New York City! But there wasn't, so I started what turned out to be the fifth Death Café in the world.

This past February marked 3 years since I held my first meeting at a local restaurant. Now we have more than 500 members on MeetUp.com, and we gather monthly at cafés around the city. The people who come are young and old; some have experienced loss, and others just feel a need to talk about death. There are all religions—Catholics, Jews, atheists, agnostics—which makes for interesting conversations. There's nothing about death that we don't cover: How do you want to die? What's your legacy? Do you want a funeral? And we laugh a lot. I had one woman who told her parents: "The best gift you can give me is to write your obituary. How do you want people to remember you?" I think baby boomers are going to make a huge difference when it comes to talking about death. We want to die how we want to die. We had the sexual revolution, and now we're going to have the death revolution.

I've learned that speaking about the unspeakable, and openly sharing your grief, makes you stronger. I don't fear death. But as for my own, I'm not ready yet. I still have a lot of living left to do. 

TELL US YOUR STORY

We'd love to read about your personal journey. Send your story to readerstories@prevention.com and we could include it in an upcoming issue.





“

The body is a
sacred garment.

—MARTHA GRAHAM

**Eat
Clean,**

**Stay
Lean**

Meet real people with true stories of weight loss success.

INTERVIEWS BY MARYGRACE TAYLOR

Eating clean is one of the most effective and sustainable ways to lose weight. It's simple, too: Rather than cutting carbs or counting calories, you eat whole foods that are fresh or minimally processed, with no chemicals or added sugars. You also eat smaller quantities more often, helping rev your metabolism and keep you full. The results are often life changing, as four *Prevention* readers discovered when they ate clean for 6 weeks on the plan in the book *Eat Clean, Stay Lean: The Diet* (Rodale, December 2016). Here, they share how they did it—and how you can do it, too.

Jenny Sucof, 47

Pounds lost: 7

Inches lost from waist: 1.5

I didn't eat much processed food before the plan, but I would have chocolate or cookies as a daily treat, bread when I went out to dinner, and lots of red wine. But when I got to be the heaviest I'd ever been, I knew I had to do something.

I didn't think at first that I could give up sugar and alcohol for 6 weeks, but it turned out to be easier than I thought. What helped—and what I liked best about the plan—is that you can eat more often throughout the day than you can on typical diets. So many people think, *Oh, you can't eat carbs when you eat clean*, but I ate lots of carbs: buckwheat pancakes and whole wheat cereal and pasta.

I learned quickly that having a hearty breakfast set me up to eat clean the rest of the day. If I had a light breakfast, I'd be hungry again shortly after.

The weight didn't come off right away, but after a few weeks, I saw a difference. Not only did the plan work, but it's also a lifestyle that I can maintain because it's not a diet—it's a healthier approach to how you eat.

PORTRAITS BY MATT RAINEY; WARDROBE STYLING BY KATHIE YOUNG;
HAIR AND MAKEUP BY CLAUDIA ANDREATTI/HALLEY RESOURCES





Steve Block, 52

Pounds lost: 22

Inches lost from waist: 3.5

I was overweight, and I didn't feel good. I'd lost weight a few times in the past, but I would always go back to eating whatever I wanted. Every night I'd have frozen yogurt or cookies, and then I'd get awful heartburn.

Since I started eating clean, I haven't had heartburn—and I've finally learned how to eat right. I used to eat peanut butter almost like it was ice cream, but now I'll have a tablespoon on an apple and feel satisfied.

The biggest challenge was making sure I had the right foods wherever I went. My girlfriend and I recently took a trip to Iceland, and we brought our own snacks because we weren't sure what would be available. We also rented an apartment and made a healthy breakfast there every day. If I go to the movies, I'll bring a granola bar made with oats and nuts. At a bar, I'll order seltzer with a splash of cranberry juice for flavor.

I was a sugar addict, there's no doubt. But I don't crave it anymore. In fact, I don't crave anything. I could eat like this forever—I've even lost another 10 pounds. I feel better, and I also feel happier.

Clean Eating Starts Here

Eating clean to lose weight means having three meals and at least one snack per day (opt for two if you exercise) so you never get hungry. Here are delicious examples of a clean breakfast, snack, lunch, smoothie (your second snack), and dinner, all made from real, whole foods.



PB&J GRANOLA

Makes 2½ cups (1 serving = ¼ cup)

Heat oven to 250°F. In bowl, combine 1½ cups rolled oats, ½ cup puffed brown rice cereal, ¼ cup peanuts, 2 Tbsp flaxseed, and a pinch of salt. In pan over medium heat, combine 2 Tbsp olive oil, 2 Tbsp peanut butter, 2 Tbsp strawberry all-fruit spread, and 1 tsp vanilla extract. Toss with dry ingredients. Spread evenly on sheet pan. Bake 30 minutes, stirring every 10 minutes. Cool. Stir in ¼ cup raisins. Serve over low-fat Greek or plain yogurt.



Want to try the full 6-week plan yourself? Preorder a copy of *Eat Clean, Stay Lean: The Diet* at rodalewellness.com/ecslsldiet.



LEMON ROSEMARY WHITE BEAN DIP

Serves 8 (½ cup each)

In food processor or blender, process 1 can (15 oz) **reduced-sodium white beans**, rinsed and drained; 1 Tbsp olive oil; 2 tsp fresh lemon juice; 1 tsp lemon zest; ¼ tsp sea salt; 1 clove **garlic**, chopped; and 1 Tbsp water until smooth. Pulse in 1 tsp finely chopped fresh rosemary. Transfer to airtight container and refrigerate up to 5 days. Serve with **freshly cut carrots**, celery sticks, bell peppers, or other fresh vegetables.



SHAVED VEGGIE SALAD

Serves 2

In bowl, whisk 2 Tbsp **fresh dill**, chopped; 2 tsp olive oil; 1 tsp lemon zest; 1 tsp white wine vinegar; ½ tsp sea salt; and ¼ tsp **black pepper**. Using vegetable peeler, shave lengthwise into long ribbons 6 to 8 **asparagus spears**, 2 med peeled carrots, 1 **broccoli stalk** (no florets), and 1 med **zucchini**. Toss with dressing and serve.

MaryPat Scorzetti, 54

Pounds lost: 9

Inches lost from waist: 1.5

I spent years chasing an ideal dress size rather than a certain level of health. But when I started eating clean, I didn't set out to lose a specific amount of weight—I realized I'd spent too much of my life worrying about weight and numbers.

What I like about this plan is that it expanded my knowledge of which foods are healthy and which aren't. On other diets, I would stay within the calorie range, but I was eating crappy foods. If I looked at a food label, it was only to check the fat content. But now I pay attention to whether a food has preservatives or is organic—and when I buy organic produce, I think of it as money well spent: I buy only the fruits and vegetables I can use rather than buying regular produce in bulk and letting much of it go to waste.

This plan helped me realize that I need less food than I thought I did. My palate also changed. Instead of ice cream after dinner, I'm satisfied with half of a chocolate-covered banana. And the best bonus of all has been that my joint pain from osteoarthritis has decreased, too.





Richard Mastronardo, 48

Pounds lost: 21

Inches lost from waist: 2.75

In the past, I lived to eat. Food was something that could make or break my day. I ate lots of packaged foods and went to restaurants two or three times a week.

I'd tried diets before and stuck to them, but I wouldn't lose even a pound. So I didn't expect this plan to work. But I was motivated: My doctor wanted me to take blood pressure pills, and I didn't want to do that. I knew I had to lose weight.

What I love about eating clean is that I didn't have to think about it. I didn't need to enter anything into an app or figure out whether I could have carbs or not. I did worry about what I'd eat when I traveled for business, which I did 5 of the 6 weeks on this plan. But I learned to order salmon or grilled chicken and swap fries for veggies; if portions were huge, I'd eat half. I also started sharing appetizers with colleagues. I was able to get a taste, which was all I needed.

It takes planning and common sense, but it's easy to eat this way. And I achieved my most important goal: My blood pressure dropped from 145/100 to 121/89—without medication.



GREEN GINGER SMOOTHIE

Serves 1 (Makes 1¼ cups)

Blend ½ cup **chopped kale**, ½ cup **coconut water**, ¼ cup **fresh or frozen mango chunks**, ¼ cup **fresh or frozen pineapple chunks**, 1 Tbsp **chia seeds or flaxseed**, ½ tsp **grated fresh ginger**, ¼ med **avocado**, and ½ cup **water** until smooth.



ISRAELI COUSCOUS SALAD WITH SALMON

Serves 2

Cook ¾ cup **Israeli couscous** per package directions. In jar with tight lid, combine **juice of ½ lemon**, 2 tsp **olive oil**, and ½ tsp **dried oregano**; shake until combined. Combine cooked couscous with 1 can (5 oz) **wild salmon, drained and flaked**; ½ cup **grape tomatoes, halved**; ¼ cup **crumbled feta**; 8 **pitted kalamata olives**; and ½ **cucumber, peeled, seeded, and chopped**. Toss with dressing and add salt to taste.

Your Perfect Day

AN HOUR-BY-HOUR GUIDE

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Is your brain a beehive of activity?

Are you frequently multitasking, even though recent research shows that our minds are not meant to? (One study finds that multitasking can even temporarily lower your IQ as much as if you'd lost a night's sleep.) If you're still struggling to cram everything you can into a 24-hour cycle, stop. Calm down, take a deep breath, and let our health and wellness experts offer you the ideal, sometimes surprising, times to do almost anything.

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BY SARAH KLEIN

Illustrations by Harry Campbell





am

GET INTIMATE

7 AM

→ Instead of reaching for the snooze button, reach for your partner. Men's and women's testosterone levels (which play a big role in arousal) are at their peak first thing in the morning and lowest around bedtime, when most people have sex.



Get Weighed

7:30 AM

→ Jump on the scale at the same time once or twice a week, advises Lisa Young, an adjunct professor of nutrition and food studies at New York University.

Break a Sweat

7:35 AM

→ Rather than wait for a weekend treadmill session, take a brisk prebreakfast walk instead. You'll burn more fat because you haven't yet consumed any carbs, so the body can't turn to them first for energy. An early workout can also help you stick to your fitness goals. "You're less likely to skip out on exercise if you do it in the morning," says G. Ryan Shelton, medical director of internal medicine at Mecklenburg Medical Group SouthPark in Charlotte, NC. Plus, it adds mental focus and energy to the start of your day.



EAT BREAKFAST

8 AM

→ Time your morning meal to within an hour or two of getting up. "Waiting too long to eat breakfast can cause your blood sugar to dip," Young says, adding that you'll feel famished later. If you have a high-protein breakfast, you'll eat less later in the day.

FROM TOP: GALLERY STOCK, WINNIE BRUCE/OFFSET

See a Doctor

9 AM

→ You can avoid a long wait if you make an early appointment, before your doctor encounters distractions or other appointments that run long, says Shelton. Try to get your flu shot early, too. University of Birmingham researchers found that people who were vaccinated between 9 and 11 AM had a higher antibody response, which implies they may gain more protection than those who receive vaccinations in the afternoon.



Have Your First Coffee

10 AM

→ Your usual habit of reaching for the java as you're turning off your alarm is unwise, says sleep specialist and clinical psychologist Michael J. Breus, author of the new book *The Power of When*. "On first waking, you have high levels of the stress hormone cortisol, which makes you feel more awake and alert. If you add caffeine, all you're doing is making yourself feel jittery."

TACKLE A BIG PROJECT, DO YOUR TAXES, FINISH YOUR NOVEL...OR JUST WORK ON A CROSSWORD PUZZLE

11 AM

→ You're at your sharpest mentally by midmorning, when your grogginess is gone (and by now you're fully caffeinated, since coffee's effects kick in after about 10 minutes and last 4 to 6 hours). Productivity is also high because the activity is still relatively new—the longer we work at something, the less efficient we become. If you tackle tough work now, Breus says, you'll get it done in record time.



pm

Eat Lunch 12 PM

→ Aim to eat your midday meal about 4 hours after having breakfast, Young says. And if you can, enjoy another walk for 10 to 15 minutes before you take a bite. This will tamp down your appetite so you'll make healthier choices at lunch as well as avoid your coworker's candy bowl later on, adds Breus.

Fill Your Fridge

1 PM

→ According to a Cornell University study published in *JAMA Internal Medicine*, hungry shoppers fill their carts with more calories. Food shopping in the hours postlunch and presnack—or between 1 and 4 PM—resulted in a lower calorie total for groceries than shopping closer to dinnertime. A bonus in the early afternoon, says Young, is fresher produce, because employees restock shelves with new shipments in the late morning.



Attack a Snack

4 PM

→ Midafternoon nibblers pick healthier bites, according to a University of Illinois at Chicago study published in the *Journal of the American Dietetic Association*. The researchers found that afternoon snackers ate more fiber, fruit, and veggies than morning snackers did and also lost more weight. Young's advice: Grab a snack more than 2 hours after you ate your last meal to help keep you satisfied for the 7 hours between lunch and dinner.

Take a Nap

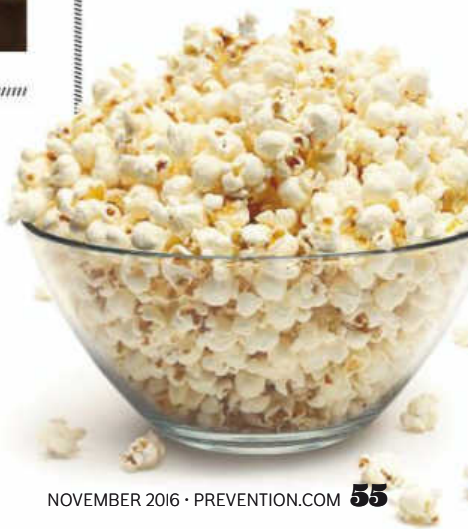
2 PM

→ Now is the time to steal some shut-eye. You can reinvigorate yourself with 15 minutes of rest, according to Breus. Stick to a short snooze so you don't enter deep sleep; otherwise, you can end up feeling groggy than when you started.

MAKE A BIG DECISION

3 PM

→ Aim extra brainpower at your biggest problem in midafternoon, when emotion, hunger, and fatigue have the least chance of clouding your judgment. "You want to have some oomph in you but not be overwhelmed by stress," says psychologist Elizabeth Lombardo. While you're deciding, you may want to skip the trip to the ladies' room. In a study published in the journal *Psychological Science*, people tasked with finding solutions on a full bladder tended to make better decisions, thanks to what the researchers called "increased impulse control in the behavioral domain."



Eat Dinner 7 PM

→ Your last meal of the day should also be the smallest—and, best-case scenario, finished before 8 PM. Eating within 3 hours of bedtime can lead to digestive trouble and disrupted sleep, Young says.



POST ON SOCIAL MEDIA

8 PM

→ This is prime time for social networking, when posts get the most likes, shares, and comments. It's also a healthy time to post. You're staring at the screen far enough from bedtime that the screen time won't disturb your sleep cycle—or your mood. The more time you spend browsing social media sites, the more likely you are to get depressed, according to new research. “Social media posts aren't what you want to put into your mind right before you go to sleep,” Lombardo says.

Watch the Tube 9 PM

→ When you push back your bedtime to squeeze in “just one more episode,” it confuses your brain, which is accustomed to entering sleep mode at a particular time. If you must catch up on a show, finish your screen session—which includes your computer and your phone—by 10 PM to ensure restful sleep.

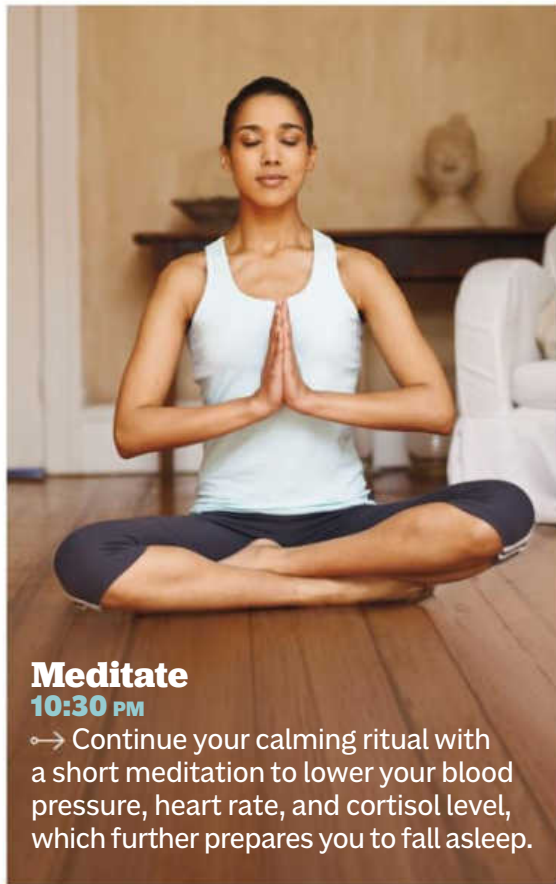
Take a Bath

10 PM

→ Now that you've powered down your devices, a late-evening bath is a great way to power yourself down. Core body temperature naturally drops at night, signaling the brain that sleep is on the way. A warm bath artificially raises body temperature; then, when you get out of the tub, the exaggerated cooldown is a clear sign that it's time for bed.



FROM TOP: JAMES RANSOM/OFFSET, JELENA JOJIC/TOMIC/ISTOCKSY



Meditate

10:30 PM

→ Continue your calming ritual with a short meditation to lower your blood pressure, heart rate, and cortisol level, which further prepares you to fall asleep.

CALL IT A NIGHT

11 PM

→ While sleep needs vary from person to person, between 7 and 9 hours is considered optimal for healthy adults, according to the National Sleep Foundation. Experts advise calculating your bedtime in 90-minute sleep cycles. Ideally, you'd complete at least four cycles each night, though five is even better.



GET OUT OF BED

11:20 PM

→ If you're wide awake 20 minutes or more after tucking in, get up. Resist the urge to peek at a screen, which will further interrupt your sleep. Calm yourself by reading, meditating, or doing breathing exercises. Keep the lights dim. After 10 to 15 minutes, head back to bed and try again. Sweet dreams, and please don't try to fall asleep by counting the things on your to-do list or you'll undo the equilibrium you've gained, we hope, from this guide to good timing. 🌙



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Make *the Most* of Your Meals

Six dishes big enough to feed
a hungry holiday crowd
or cook once and eat all week

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By **KHALIL HYMORE**



SPANISH
CHICKEN &
RICE,
p. 60

Photographs by
CHRISTOPHER TESTANI



SPANISH CHICKEN & RICE

Serves 16

Prep time: 45 minutes

Total time: 1 hour 30 minutes

- ¼ c olive oil
- 8 bone-in, skin-on chicken breasts (1 lb each), halved
- 6 oz chorizo, diced
- 6 cloves garlic, minced
- 4 bell peppers, sliced into strips
- 2 lg Spanish onions, diced
- 4 c short-grain brown rice
- 1 c semidry white wine
- 2 Tbsp smoked paprika
- 1 tsp kosher salt
- 1 tsp black pepper
- 5 c reduced-sodium chicken broth
- 1 can (28 oz) fire-roasted diced tomatoes
- 2 Tbsp orange zest
- 2 bags (10 oz each) frozen peas, thawed
- Fresh parsley, for serving

Heat oven to 375°F. Heat oil in 15" × 12" roasting pan over two burners on medium-high. Season chicken with salt and pepper and add, skin side down, to pan. Cook until skin is browned, 4 minutes. Remove; set aside. Place chorizo in same pan; cook until crisp. Remove to paper towel-lined plate. Add garlic, peppers, and onions; cook until tender, 6 minutes. Add rice, wine, paprika, salt, and pepper. Cook until wine reduces to 2 Tbsp. Stir in broth, tomatoes (with juice), and zest; bring to a boil. Turn off heat; nestle chicken into rice. Bake until chicken is cooked and rice is tender, 45 minutes. Stir in chorizo and peas; bake 5 minutes more. Serve with parsley or store covered for up to 5 days in refrigerator.

NUTRITION (per serving)

504 cal, 41 g pro, 51 g carb,
5 g fiber, 5 g sugars, 12.5 g fat,
3 g sat fat, 597 mg sodium



HEARTY BRUSSELS SPROUT SLAW

Serves 16 • Prep time: 15 minutes • Total time: 25 minutes

- 1½ c extra virgin olive oil
- 1 c apple cider vinegar
- 4 tsp Dijon mustard
- 2 sm shallots, minced
- 1 tsp kosher salt
- 1 tsp black pepper
- 2 lb brussels sprouts, trimmed and shredded
- 2 bags (10 oz each) frozen shelled edamame, thawed
- 2 c fresh parsley
- 2 c pomegranate arils
- 1 c chopped walnuts, toasted

In 1 qt jar with lid, add oil, vinegar, mustard, shallots, salt, and pepper and shake until combined. Toss sprouts, edamame, parsley, and pomegranate with 1 cup or more of dressing. Serve with walnuts or store covered for up to 5 days in refrigerator.

NUTRITION (per serving)

198 cal, 7 g pro, 15 g carb,
5 g fiber, 5 g sugars, 13 g fat,
1.5 g sat fat, 74 mg sodium





BERRY SLOW-COOKER OATS

Serves **16** • Prep time: **5 minutes** • Total time: **4 hours 5 minutes**

5 c whole milk
2½ c steel-cut oats
2 bags (10 oz each)
frozen mixed berries
2 Tbsp brown sugar
1 vanilla bean,
split and scraped
Pinch of kosher salt
1 c sliced almonds,
toasted

5 Tbsp unsweetened
shredded coconut
3 Tbsp hemp seeds
4 tsp chia seeds
4 bananas, sliced

Coat 6 qt slow cooker with
cooking spray. Add milk, 5 cups
water, oats, berries, sugar,
vanilla, and salt. Stir to combine.

Cook 4 hours on high or 8 hours
on low. Stir. Serve with almonds,
coconut, hemp, chia, and
bananas or store covered for
up to 5 days in refrigerator.

NUTRITION (per ¾ cup)
254 cal, 9 g pro, 36 g carb,
6 g fiber, 12 g sugars, 10 g fat,
3 g sat fat, 45 mg sodium

ROOT VEGETABLE GRATIN

Serves 16 • Prep time: 20 minutes • Total time: 2 hours

7 Tbsp olive oil
6 c whole milk
2 Tbsp chopped fresh thyme
½ tsp nutmeg
Zest of 1 orange
1½ tsp kosher salt
1½ tsp black pepper
2 lb celery root, peeled,
sliced ½" thick
2 lb sweet potatoes, scrubbed,
sliced ½" thick
2 lb turnips, scrubbed,
sliced ½" thick
2 lb Yukon gold potatoes,
scrubbed, sliced ½" thick
2 c panko bread crumbs
2 c grated Parmesan

Heat oven to 375°F. Grease two 13" × 9" baking dishes with 1 Tbsp oil each. In saucepan over medium heat, combine milk, 4 Tbsp of the oil, thyme, nutmeg, zest, and 1 tsp each of the salt and pepper; bring to a simmer. Remove from heat.

Layer vegetables in dishes and top with milk mixture. Cover with foil and bake until tender, 1 to 1½ hours. Toast bread crumbs and remaining 1 Tbsp oil in large skillet over medium heat. Transfer to bowl to cool. Stir in cheese and remaining ½ tsp each salt and pepper. Remove foil from dishes; cover with toasted bread crumbs and bake until golden, 15 minutes more. Serve or store covered for up to 5 days in refrigerator.

NUTRITION (per serving)

333 cal, 13 g pro, 41 g carb,
5 g fiber, 10 g sugars, 13 g fat,
4.5 g sat fat, 608 mg sodium





Q

CRANBERRY CHEDDAR SPREAD

Serves **16**

Prep time: **15 minutes**

Total time: **40 minutes**

8 oz reduced-fat cream cheese,
room temperature

8 oz extra light sharp cheddar,
shredded

6 oz fat-free Greek yogurt

1½ tsp kosher salt

1½ tsp black pepper

1 Tbsp olive oil

1 lg shallot, diced

2 c fresh or frozen cranberries

3 Tbsp honey

1 Tbsp fresh thyme

Bread, crackers, or crudité's,
for serving

Heat oven to 400°F. Coat 2 qt baking dish with cooking spray. In bowl, beat cream cheese, cheddar, yogurt, and 1 tsp each salt and pepper until smooth. Transfer to dish. Heat oil in large skillet over medium heat. Add shallot and cook until tender, 3 minutes. Add cranberries, honey, thyme, and remaining salt and pepper. Cook until cranberries release juices, 4 minutes. Spread over cheese mixture and bake until bubbly, 15 to 20 minutes. Serve with bread, crackers, or crudité's or store covered for up to 5 days in refrigerator.

NUTRITION (per serving; spread only) 101 cal, 7 g pro, 7 g carb, 1 g fiber, 5 g sugars, 5.5 g fat, 2.5 g sat fat, 332 mg sodium



PUMPKIN & TURKEY CHILI

Serves **16** • Prep time: **20 minutes**

Total time: **1 hour 10 minutes**

- 2 Tbsp olive oil
- 3 cloves garlic, minced
- ½–1 jalapeño, minced
- 1 lg white onion, diced
- 2 red bell peppers, diced
- 2 lb ground turkey
- 3 Tbsp chili powder
- 4 tsp ground cumin
- 2 lb pumpkin, peeled and diced
- 2 cans (15.5 oz each) white kidney beans, rinsed and drained
- 1 can (28 oz) fire-roasted diced tomatoes with green chiles
- 4 cinnamon sticks
- 3 bay leaves
- 1 tsp kosher salt
- 1 tsp black pepper
- 1 c fat-free plain yogurt, for serving
- ¼ c fresh cilantro, for serving

In pot, heat oil over medium-high heat. Add garlic, jalapeño, onion, and peppers. Cook until tender, 8 minutes. Add turkey and cook, breaking up with spoon, until browned, 5 minutes. Stir in chili powder and cumin. Cook until fragrant, 1 minute. Add pumpkin, beans, tomatoes (with juice), cinnamon, bay leaves, salt, and pepper. Cook, partially covered and stirring occasionally, until pumpkin is tender and chili thickens, 35 minutes. Discard cinnamon and bay leaves. Serve with yogurt and cilantro or store covered for up to 5 days in refrigerator.

NUTRITION (per serving)

180 cal, 16 g pro, 16 g carb,
3 g fiber, 4 g sugars, 6 g fat,
1.5 g sat fat, 276 mg sodium



What you need to know about...

Immuno

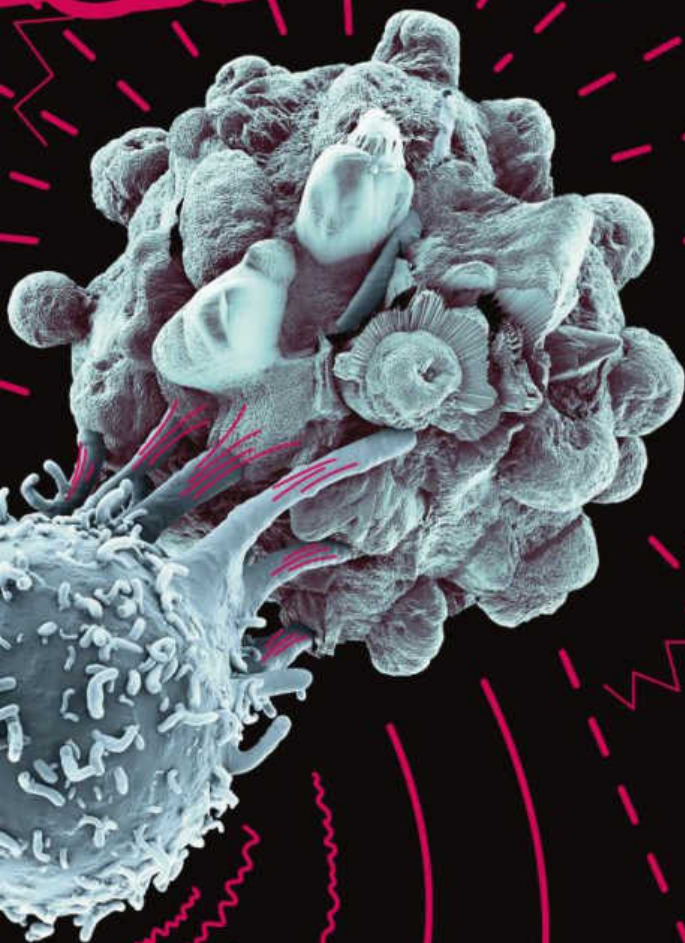
A Remarkable Cancer Breakthrough

BY AMY PATUREL

Immunotherapy is one of the most important advances in cancer treatment in decades. For a long time, doctors have relied on three types of treatment, known unfashionably as slash (surgery), burn (radiation), and poison (chemotherapy). Immunotherapy is completely different. It works by harnessing the power of the body's own immune system, helping immune cells seek out and destroy cancer cells more effectively. With this new approach, cancer can potentially be attacked in a way that doesn't just extend lives for months or years but actually eradicates the disease.



therapy



The War Begins

A killer T cell (bottom), one of the immune system's soldiers, attacks a cancer cell.



Drug Delivery
Immunotherapy drugs are given intravenously, like most traditional chemotherapy.

“The reason immunotherapy is so promising is because we’re not treating the cancer or tumor cells—we’re treating the immune system,” says Padmanee Sharma, a professor of genitourinary medical oncology and immunology at MD Anderson Cancer Center in Houston. “Once we get the immune system working correctly, it shouldn’t matter which type of tumor we’re targeting. This really represents a paradigm shift in cancer research and treatment, resulting in unprecedented responses in melanoma and lung and kidney cancers,” Sharma says.

Researchers are hopeful that eventually all forms of cancer will succumb to this new treatment. More than 1,500 cancer immunotherapy drugs are currently in the research and development pipeline, according to the Parker Institute for Cancer Immunotherapy.

We asked top experts to answer some of the most common questions about this breakthrough.

1 What is immunotherapy?

It’s been part of the medical arsenal for decades, mainly in the form of vaccines that spark the body to produce antibodies to prevent infectious disease. The new immunotherapy treatments are drugs that have been specifically developed to help strengthen the body’s defense system against cancer.

Doctors have long wondered why the immune system doesn’t fight off cancer as effectively as it does other diseases. “We knew the immune system should be able to fight cancer, but it wasn’t

generating a strong enough response to kill off the disease,” says Nora Disis, a professor of medicine at the University of Washington.

In the 1980s, scientists figured out one of the problems: Cancer cells sometimes contain many of the same molecules as normal cells, without enough abnormal molecules for the immune system to recognize them as dangerous. Armed with this new knowledge, scientists began the search for substances that would help the body identify the rogue cells and destroy them.

2 How do immunotherapy drugs work?

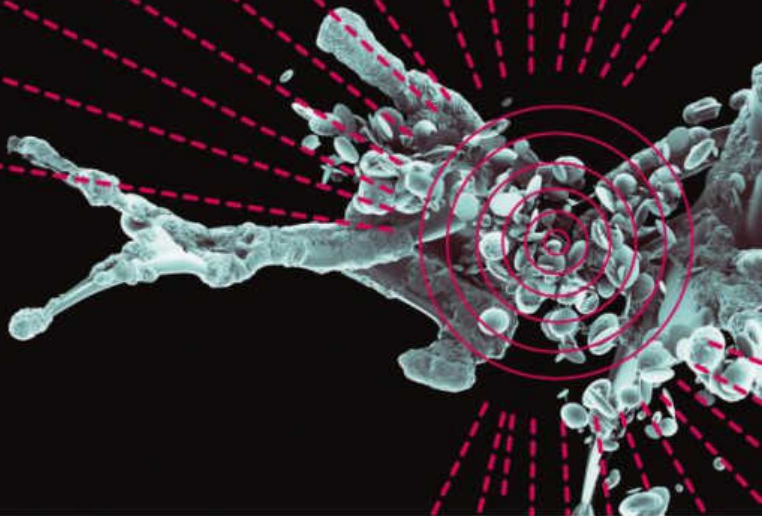
The immune system features an intricate network of on-off switches that free immune cells to fight disease when and where necessary but keep them in check otherwise so they don’t spin out of control and damage the body’s healthy organs and tissues. Today, the most widely used immunotherapy drugs, called checkpoint inhibitors, release the brakes and allow the immune system’s fighter T cells to attack cancer.

The strategy seems to be working. For example, long-term follow-up of nearly 5,000 patients with metastatic melanoma, a deadly form of cancer with a median survival rate of 11 months, shows that 20% of those who took a checkpoint drug called ipilimumab (Yervoy) survived for 3 years; some lived 5 to 10 years or longer.

To date, the FDA has approved four checkpoint inhibitors—ipilimumab, nivolumab (Opdivo), pembrolizumab

War Over

The killer T cell has won the battle, and the cancer cell is now dying.



(Keytruda), and atezolizumab (Tecentriq)—as cancer therapy. All are given intravenously, like most cancer chemotherapy drugs.

3 What are the advantages of immunotherapy?

Many cancer treatments, including radiation and chemotherapy, weaken the immune system. In addition to obliterating cancer cells, they damage the body's infection-detecting white blood cells. "With immunotherapy, there's less risk of infection because those white blood cells remain intact," explains Matthew Davids, an attending physician at Dana-Farber Cancer Institute and Harvard Medical School.

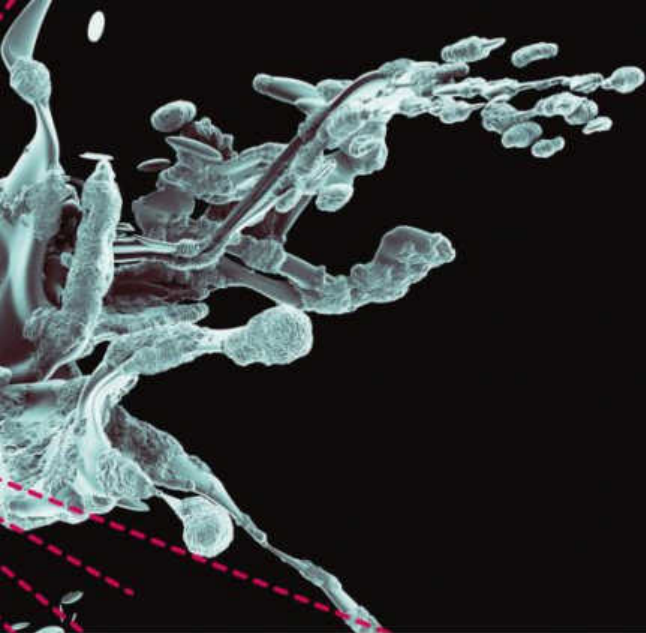
Even cancer cells that are resistant to chemotherapy are responding to immunotherapy drugs, both in the short and long term. Once the drugs have

enabled the body's T cells to recognize and respond to tumor cells, the T cells are programmed to keep working until the tumor is eradicated. "Those targeted T cells remain in your system indefinitely," says Disis. "So if the cancer ever comes back, your immune system will kick in and kill it even before you realize you're having a recurrence."

4 What are the side effects of immunotherapy?

Most side effects that accompany immunotherapy are considered mild to moderate, but about 20% of patients have reactions that are dangerous or even life-threatening.

"When we release the brakes with checkpoint inhibitors, we're allowing the immune system to fight cancer," explains Sharma. "However, the resulting inflammation can damage the skin,



lungs, intestines, joints, and virtually any bodily system.”

Adds Disis: “If patients know what to watch for and see their physician when those symptoms set in, we can stop the reaction and combat the symptoms.”

5 Which cancers are responding to immunotherapy?

So far, the FDA has approved checkpoint inhibitors for advanced melanoma, Hodgkin's lymphoma, and a small subset of solid tumors, including cancers of the lung, kidney, and bladder. Another type of immunotherapy called chimeric antigen receptor (CAR) T-cell therapy (more on this later) is still under investigation. It's not an FDA-approved treatment yet, but patients with blood cancers like leukemia and lymphoma are responding remarkably well to these novel agents.

6 Why doesn't immunotherapy work for everyone?

Right now, checkpoint inhibitor drugs work for only 20 to 30% of patients, and researchers aren't entirely sure why. “We know that tumors with a lot of mutations, such as most melanomas and cancers of the lung and bladder, appear almost like mini-viruses, making them easier for the immune system to detect and fight,” says Disis. So researchers are trying to figure out how to boost tumor-specific immunity so the drugs will work better.

Scientists are also paying attention to something called the tumor microenvironment, which is the area immediately around the tumor. “Some tumors have built a wall, preventing the immune system's T cells from getting in, so we have to find ways to break down the wall before the immune system can

attack the cancer,” says Sharma. “Once we learn more about what the hurdles are, we can devise the strategies to overcome them.”

7 Are there patients whose immune systems don't recognize cancer as a threat and therefore can't benefit from immunotherapy?

For a checkpoint blockade to work effectively, the immune system has to have already produced fighter T cells against the tumor. Some cancers don't generate any response from T cells, but scientists across the country are finding ways to work around this obstacle by genetically engineering a patient's own immune cells to spot and kill cancer. In CAR T-cell therapy, scientists harvest the T cells from a patient's blood and genetically engineer them to target specific proteins in the patient's tumor. They grow several billion of these modified cells in the lab and then reinfuse them into the patient, hoping the billions of extra immune cells will be able to overwhelm the tumor.

So far, this approach has been used only against leukemia and lymphoma, with dramatic responses. In early trials in patients with advanced acute lymphoblastic leukemia, many of the cancers disappeared entirely. “CAR T cells are sometimes called ‘serial killers’ because they persist in the body for a long time and protect against recurrence,” says Davids. “The trouble is, you need to genetically engineer CAR T cells for each patient, which is very labor intensive—and expensive.”

8 Can immunotherapy also be used to prevent cancer?

Yes. There are now vaccines that target viruses that can trigger cancer, including hepatitis B (the leading cause of liver cancer) and human papillomavirus, a type of virus that causes 99.7% of cervical cancers. “If you're vaccinated against the virus, you don't get infected, so your chance of getting cancer is dramatically reduced,” says Brian Czerniecki, chair of the department of breast oncology at Moffitt Cancer Center in Tampa. Since it became available in 2006, the HPV vaccine has helped reduce the prevalence of cervical cancer by 64% in females ages 14 to 19 and by 34% in those 20 to 24 years old, according to a study published in the journal *Pediatrics*.

9 How much does immunotherapy cost?

Immunotherapy is a complicated technology that has already required significant time—and billions of dollars—to investigate. In other words, it's extremely expensive. Pharmaceutical companies are understandably trying to recoup their research and development investment. Ipilimumab, the FDA-approved checkpoint inhibitor drug for melanoma, for example, costs roughly \$120,000 for four doses over 3 months. But if immunotherapy actually cures cancer, it may turn out that it's far less expensive than rounds of chemotherapy and radiation that have to be repeated at each recurrence. “Some of the drugs that are currently

on the market to treat chronic blood cancers, for example, cost \$100,000 per year, but you might need treatment for a decade or more,” says Davids. “So even though the upfront costs of immunotherapy are high, they may represent a savings over other cancer drugs because of the potential for a cure.”

Insurers cover the FDA-approved immunotherapy treatments, but copayments may be high. Unapproved immunotherapy agents, CAR T-cell therapy, and combinations that are under investigation are available only to patients participating in clinical trials. “In those cases, the agency or company funding the study covers the cost,” says Disis.

10 What's the future of immunotherapy?

In addition to treating cancer, immunotherapy is being looked at as a cure for other diseases. For cancer, the aim is to take off the immune brakes and get the system revved up. But if you make the brakes stronger instead, you may be able to halt autoimmune conditions—in which the immune system attacks the body itself, rather than an invader—such as lupus and rheumatoid arthritis. “Once we can understand how to focus immunotherapy in specific ways, I can see



More on the Way

There are more than 1,500 new immunotherapy drugs currently in the pipeline.

lots of different ways it can be used,” says Sharma.

In the fight against cancer, experts agree that the future of immunotherapy involves stringing together treatments—such as CAR T-cell therapy, cancer vaccines, immune checkpoint inhibitors, and other techniques—to produce even greater effects. “Most people still think of cancer as a death sentence, but there is hope. With immunotherapy, we’re making significant headway, and we now have patients whom we consider cured,” says Sharma. “That’s remarkable progress.”



If you're
sidelined by
a fitness injury,
use these
strategies to
boost your
spirits and help
you heal
faster.

Down But Not Out

By Cindy Kuzma

ILLUSTRATIONS BY
MICHAEL BYERS



age 51, Karen Stevens was the healthiest she'd ever been in her adult life. Over the past several years, she'd traded smoking for a steady gym habit. Working her way from two weekly strength-training classes to four, she now saw toned muscles she'd never thought she would have. And she felt great: "Once you get into a routine and see changes happening to your body, it's cathartic and invigorating," says Stevens, who was single and living in Los Angeles at the time.

Another positive: She met a man who shared her interest in an active lifestyle. On a ski weekend with him at Mammoth Lakes in northeastern California, she took a turn too slowly and her ski got stuck in the snow. Stevens fell down hard, tearing a meniscus and two tendons in her knee. After returning to LA and having surgery a month later, she was sent home with instructions to have 4 months of physical therapy and take 3 to 4 months off from working out. While she anticipated the pain that came with healing from the injury and surgery, the downward emotional spiral she fell into shocked her. "I would start crying

for no reason," she says. "I was frustrated, depressed, and needy, which affected my relationships." The romance crumbled, along with her self-confidence.

Stevens's reaction is common among those who enjoy staying active. "Injuries can take a big toll on your psyche," says Jordan Metzl, a sports medicine physician at the Hospital for Special Surgery in New York City. "So much of how we feel about ourselves and our bodies, the way we approach our lives, and how we deal with stress is wrapped up in our ability to be active."

The injuries themselves are common, too: In one study of previously sedentary adults over age 60 who began a fitness program, more than 1 in 10 sustained an injury within the first year. Die-hard fitness devotees are also at risk of overuse injuries like tennis elbow, runner's knee, and shin splints. In fact, up to 75% of long-distance runners report an injury every year.

For complete healing, Metzl and other experts say, rehab should involve more than just the body. In fact, healing your psyche's wounds can help you get back to your workouts sooner. "Your ability to adjust, or regain what we'll call emotional flexibility, is a factor in how fast you recover," says psychologist Uri Heller, director of health intelligence at GhFITLAB, a personal training facility in Chicago.

If you've suffered a fitness injury, don't just rely on rest, ice, and a bottle of ibuprofen. Watch out for these five common mental roadblocks that can turn your workout hiatus into an emotional



minefield. Then use our expert-backed advice to ensure a happier—and possibly even faster—recovery.

MENTAL ROADBLOCK #1 Your mood sinks.

As many as 1 in 4 injured athletes develop symptoms of depression, according to research cited in the *Journal of Clinical Sport Psychology*. In another study, when University of Maryland researchers asked frequent exercisers to stop exercising for 2 weeks, their scores on a negative-mood scale shot up. Exercise produces feel-good brain chemicals, including the neurotransmitter GABA and compounds called

endocannabinoids, which produce euphoric feelings, says Paul Arciero, a nutrition and exercise scientist at Skidmore College. When you're sidelined from your go-to workout, levels of these chemicals dwindle and your mood can tank.

FIX IT: Choose a different activity.

"Few injuries require complete rest," Metzl says. If you can't run, you may be able to walk or do yoga. If you're having trouble walking, maybe you can swim or ride a stationary bike. Any aerobic exercise you can do without worsening pain stimulates the production of endocannabinoids. Even three hour-long gentle yoga sessions per week boost levels of GABA enough to ease

both depression and anxiety, according to a study in the *Journal of Alternative and Complementary Medicine*.

If a limited workout routine still leaves you feeling blah, try adding meditation, which also boosts GABA levels, Arciero says. When Angela Travaglini, 40, sustained a shoulder injury from her daily yoga practice that made even a simple Child's Pose painful, she spent some time wallowing in self-pity—then turned her mood around by returning to the in-line skating she'd loved as a teen and adding 5 to 15 minutes of meditation to her day. "The combination really helped me stay positive until I could get back to my yoga practice."



MENTAL ROADBLOCK #2**Fears run rampant.**

On a sweltering day in July, 43-year-old Lori Cheek took her first-ever Zumba class outdoors in New York City's Union Square Park. During a side shuffle, she turned her leg the wrong way, felt her lower leg tighten, and heard a sickening rip. "In a second, everything changed," she says. Her torn calf muscle hurt so much she thought she would vomit—and her mind filled with visions of hobbling around the city on crutches and regaining the 15 pounds she'd recently lost.

FIX IT: Regain control.

While weight gain and fitness losses are common following an injury, they're not inevitable if you take steps to prevent them. Start with your diet: Cut out extra calories from sugars, refined grains, and alcohol and put a priority on protein, which contains the raw ingredients your body needs to repair damaged tissue and rebuild muscle. (The more muscle you can maintain, the more calories you'll burn, even if you don't exercise as much.) Arciero recommends "protein pacing,"

Few injuries require complete rest.
If you can't walk or run, jump in the pool.

Such apprehension isn't uncommon—or unfounded, Arciero says. After only 48 hours of not exercising, a phenomenon called "detraining" begins to undo your hard work, slowing down the systems your body uses to power your stride, propel your swimming stroke, and burn off fat. Carrier proteins that shuttle energy in the form of glucose to muscles start to move as lethargically as sleep-deprived teenagers, raising your blood sugar levels. Your blood loses its ability to carry oxygen around your body, so you'll feel out of breath with less effort. And your shrinking muscles burn less fat, potentially causing a noticeable change to your body composition within 7 to 10 days—a finding supported by Arciero's research.

or consuming 20 to 30 g four to six times throughout the day. Getting more than the government-recommended 0.8 g per kg of body weight (54 g for a 150 lb woman), and spreading it out, ensures you'll never fall short, he says.

In addition, if you're able to move at all, try to do some form of modified exercise. Even doing one workout a week that gets your heart rate up or a session or two of strength training that focuses on the working parts of your body can help you maintain your fitness, Arciero says.

MENTAL ROADBLOCK #3**You miss your tribe.**

Whether you participate in a weekly yoga class or a daily walking group, the

blend of consistency, sweat, and physical effort often turns otherwise casual relationships into a tight community, says sport psychologist Jeff Brown, author of *The Runner's Brain*. When Stevens quit smoking and started taking workout classes, she gained a new social network. "You know how hard it is to make friends when you're in your 40s and 50s or beyond," she says. "The gym is a commonality—it's a social event."

Though hard-forged, those ties can unravel if you withdraw because you can't participate the way you usually do, and that lost connection can have dire consequences for your happiness and health. In a review of 148 studies, people with strong social bonds had a 50% lower risk of dying, compared with those with weak social ties, over an average of 7½ years.

FIX IT: Cultivate community.

A report from the University of North Carolina at Greensboro concluded that injured people who received social support had an easier time rebuilding their confidence and returning to their activities afterward.

After twisting her leg while doing Zumba, Cheek posted a photo of herself and her crutches on social media. The comments she received were full of well wishes and advice she believes helped speed her recovery. (Five weeks

after the injury, she was off crutches and nearly back to her regular routine.)

Brown recommends looking for ways to connect that involve helping others. When San Diego runner Kathleen Lisson, 42, had to bow out of a training program after spraining her ankle on a trail, she volunteered to work the water stations instead. "You get to see all the runners and check in with them and everyone thanks you, so you're a part of the group," she says. And when she could return to running, she had a

How to Work Out When You're Injured

Sports medicine physician Jordan Metz recommends finding an activity that doesn't cause you pain. Always talk with your doctor before trying something new.

IF YOU HAVE TRY

A foot, knee, or leg injury

Upper-body strength training, core work, swimming, stationary cycling

Hip pain

Upper-body strength training, core work

A neck, shoulder, or arm injury

Walking, stationary cycling, lower-body strength training

Back pain

Walking, swimming, yoga or other stretches to loosen hamstrings, hip flexors, and glutes

built-in cheering squad rooting for her.

MENTAL ROADBLOCK #4

Your confidence shakes.

Think of how great you feel when you finally learn a challenging yoga pose, walk a longer distance, or ace a complicated dance step. That *I did it* feeling carries over into other areas of life, boosting your confidence at work and in relationships. Getting hurt, on the other hand, can instill a feeling of inadequacy that grows each day you find yourself held back, Brown says. In fact, research shows that one of the major side effects of an injury is a reduced belief in your ability to complete tasks and accomplish goals.

And just as the feeling of mastery in the gym translates to real life, so does this sense of defeat. Low self-efficacy has been shown to interfere with healthy behaviors like exercising and eating well, impair your ability to manage some chronic diseases, and even decrease your longevity, according to a study from the University of California, San Francisco.

FIX IT: Get your best self back.

Asking “Why me?” is common after an injury, but self-pity shatters your confidence. Instead, ask “Why?”—not to blame yourself for your aches and pains but to search for the cause. Did you crash on your bike because you were



tired and needed more sleep? Did you sustain a walking injury because you have a weak core or hips? Doing research and talking with your doctor can help you get to the root of your problem, Brown says.

This knowledge can also put you back in control and help you set achievable goals for your recovery, whether you're doing more reps of a strengthening exercise, sleeping more, or meditating for 15 minutes every day. “That allows you to continue to compete against your own performance even if you aren't working out with the same intensity,” Brown says. A study by researchers at the University of Wales

showed that this goal-focused approach helped people stick with rehab routines.

MENTAL ROADBLOCK #5

You lose a piece of your identity.

If you stick with a routine long enough, your fitness habit transforms from something you do into something you are, as you know if you've ever described yourself as a runner, cyclist, or yogi. That's a good thing, Brown says: It spotlights the strong, confident aspects of your personality and can motivate you to stick with workouts.

adds, "It was a painful reminder of the fact that I wasn't able to fully participate in my favorite sport."

FIX IT: Find yourself.

Whether your recovery lasts a few weeks or a serious problem like a joint replacement or car accident causes a permanent shift in your fitness routine, you can ease your feeling of rootlessness by connecting to your underlying motivation, Cheadle says. First ask yourself why you enjoyed your particular sport. If it's because you got a rush each time you crossed a finish line, dig deeper and ask

Remember that you're more than your sport or favorite activity—you're a survivor.

Researchers have even developed a tool that measures this sense of self: the Athletic Identity Measurement Scale. People who score highly tend to feel more positive and accomplished when things go well. But when these same people get hurt and have to miss out, either temporarily or permanently, they feel adrift. "You're grieving a loss of part of you," says Carrie Cheadle, author of *On Top of Your Game: Mental Skills to Maximize Your Athletic Performance*.

For the first 8 weeks after spraining her ankle during a run, Lisson says, "I couldn't even look at my Facebook feed because it was filled with status updates from local running teams, upcoming races, and running shops." She

why that's important to you. Eventually, you'll arrive at your core values, such as feeling strong, taking care of yourself and your family, and living fully in each moment. From there, consider other pursuits that might check the same boxes: Could lifting weights also stoke sensations of strength? Could the calmness of yoga help you stay mindful? If you explore what you can do instead of getting stuck in thoughts of what you can't, you just might find a whole new world opening up to you.

What's more, coping with an injury adds a new aspect to your identity. You're more than a walker or a runner, after all. You're also a person who knows what it's like to face adversity and persevere. 



When Michael Albertson was diagnosed with diabetes, his wife, Ellen, found creative ways to offer support.



DIABETES IN THE FAMILY

How do you lead your spouse toward healthy habits without hurting your marriage?
Answer: Very carefully.

BY PAULA DERROW
PHOTOGRAPHS BY ANNABEL CLARK

IT WAS DINNERTIME IN THE SHAPIRO-EPSTEIN HOUSEHOLD, AND MICHELE SHAPIRO WAS ANGRY.

Once again, her husband, Eric Epstein, had helped himself to seconds, finished everything on his plate, and then eaten what was left in the pan on the stove—food that Michele had planned to take to work for lunch the next day. While she didn't like forfeiting her lunch, it was Eric's eating habits that really irked her. He was seriously overweight and, like 86 million other Americans, struggling with prediabetes, a condition that meant his blood sugar levels were higher than normal. Now Michele was standing in her kitchen fuming about lost leftovers and worrying that Eric wasn't taking better care of himself.

Twenty-six years ago, when the couple married, Michele never imagined that Eric's health would become a source of tension. Then trim and fit, Eric introduced her to road biking. On the weekends, they'd ride 50 to 75 miles together, burning so many calories that it didn't matter if they ended the evening with a nice dinner and a bottle of wine. As it does for many couples, though, life got busier over time, and they exercised less and put on extra pounds. But they were happy, and Michele rarely gave their waistlines much thought until 2003, when Eric's doctor discovered his out-

of-control blood sugar. At first, the news shocked the couple into action, and they began to move a little more and eat a little less. They both slimmed down, but within a few months Eric was back to parking himself in front of the TV and using entire sticks of butter when it was his turn to cook. His weight crept back up, and his blood sugar levels soared.

Michele felt resentful. Why was she the only one concerned about Eric's health? Both of them knew that lack of exercise, weight gain, and eating too much of the wrong foods inched his blood sugar ever higher. Michele worried that if he didn't change his behavior, he'd wind up with full-blown type 2 diabetes and possibly heart disease or a stroke as well. She also worried that his condition, if left unchecked, would make her a widow too soon: More than 70,000 adults die from complications of diabetes every year, and thousands more endure digestive problems, blindness, kidney failure, neuropathy, or limb amputation after years of high blood sugar.

Michele Shapiro is far from the only spouse who feels the strain of diabetes on her relationship. More than half of the partners of people living with diabetes or prediabetes say the disease makes

This summer, Michele Shapiro and Eric Epstein renewed their commitment to health with another trip to the mountain lodge that was the site of their relationship's "turning point."



RELATIONSHIPS

life more difficult for them, according to a new survey by Accu-Chek Connect, makers of a glucose monitoring system. Considering that close to half of US adults currently have diabetes or prediabetes, that's a lot of frustrated couples.

The biggest hurdle a wife or husband faces isn't just what to buy at the grocery store. It's fear. "After a spouse's diagnosis, people worry that they won't get to grow old with their partner," says Samantha Markovitz, a Mayo Clinic-certified wellness coach and diabetes educator. Though well intentioned, the worry can create a rift between couples, especially if the partner without diabetes feels ignored or unheard. Many anxious spouses turn into what some experts refer to as the "diabetes police," pleading, yelling, acting out, or simply simmering in resentment. While that approach can sometimes work to nudge a partner toward healthy changes, it's hardly healthy for the relationship. "We had the same fight almost every night after dinner," Michele admits. "Eric just learned to ignore me."

That behavior is in keeping with what John Zrebiec, director of behavioral health at Joslin Diabetes Center in Boston, has observed while working with families affected by this disease. "When you blame or criticize someone with diabetes, the person will get defensive, and the conversation won't go anywhere."

This doesn't mean concerned partners should give up on encouraging their spouses to exercise and eat healthily. But there is an approach that's less judgmental and has a higher chance



Eating healthily has become a priority for the Albertsons, who shop for fresh vegetables at their local market.

of success, experts say. Studies suggest that having a supportive spouse—one who works with you to solve problems or to identify forms of exercise you can do in tandem—makes a difference in a diabetic partner's health. "The more help the patient gets from a partner, the easier it is to manage the disease," says Zrebiec.

This type of gentle assistance has worked well for Ellen and Michael Albertson. When Michael, 60, was diagnosed with type 2 diabetes in 2014,



his initial reaction was disbelief. Once he got past that, he was all for letting Ellen, a dietitian, psychologist, and certified wellness coach, take the lead in modifying his eating habits. “I trusted that she knew what she was talking about,” he says. “And she didn’t try to change me right away.” Instead, Ellen introduced small tweaks to their diet, switching out white rice for brown, for example, and keeping a close eye on portion sizes. Ellen also tried to stay mindful of the fact that no one can be perfect about diet.

“If Michael wanted a second helping, I’d remind myself that it’s his decision,” she says. “Once I’ve said something, I’ll shut up and take a step back.”

Michael appreciated that approach. “She never scolded,” he says. “I always felt like I was being treated with respect.” The strategy worked: In the 2 years since Michael’s diagnosis, he’s lost 38 pounds and gotten his blood sugar on track. And the couple has gone on to write a book about their success: *The Diabetic and the Dietitian: How to Help Your Husband*

Defeat Diabetes Without Losing Your Mind or Your Marriage.

Not every couple finds it so easy. If you're struggling to figure out the best way to help your partner, set aside a time to talk and ask for advice. "The person with diabetes needs to tell the other person what kind of support is helpful and what isn't," says Zrebiec.

That strategy has been successful for Karen Hill, who was diagnosed with type 1 diabetes (an autoimmune disease that causes the pancreas to stop producing insulin) when she was 8 years old. Now 54, she says that in the early years of her 29-year marriage, she'd sometimes get irritated with her husband, Andrew, when he'd ask about her blood sugar or question her eating habits. "If my blood sugar was high, he'd assume I'd eaten too much or exercised without

monitoring my blood sugar levels," Karen recalls. "It was frustrating, and I felt as though I was being parented by my spouse. Eventually, I told him that I loved him, that I appreciated and needed his support, but that I was a big girl and could take care of myself," she says. After that, Andrew changed his tone. "Instead of pointing a finger, he'll make a gentle suggestion," says Karen.

That kind of empathy is crucial to a strong relationship when one partner is dealing with diabetes. "Above all, people with diabetes want others to understand how tough it can be to live with the disease," says Zrebiec. "They never get a break from thinking about their diet or blood sugar and, in some cases, have to give themselves multiple insulin injections a day. It's not easy."



Michele learned that asking her husband to go for a hike was more effective than arguing with him about what he ate.

If talking doesn't work and your partner insists on shouldering the burden of the disease alone, you may need to take a step back. "It's important to remind yourself that whatever happens with your partner's illness, you don't have control over the outcome," says Zrebiec. "All you can do is try your best, but you can't control another person."

Although supporting a partner with diabetes can be challenging, learning to be there in a way that truly helps the other person can bring you closer. Two years ago, Michele was planning to participate in a weeklong hiking program at Mountain Trek Fitness Retreat and Health Spa in British Columbia for a work assignment, so she asked Eric, who then weighed more than 300 pounds, if he'd join her. He said yes—and that was a turning point for the couple.

At the start of the retreat, Eric found the schedule daunting, but by the end he was no longer the last person to finish a hike—and he was 16 pounds lighter. He kept his new mind-set after the couple got home, making a point of checking his blood sugar twice a day and getting to the gym. This past summer, he and Michele resumed the long bike rides of their courtship. "He calls me after work to meet him for a bike ride," Michele says. "It's great sharing that again." She also feels a burden has been lifted now that she's learned that, as clichéd as it sounds, actions speak louder than words. "I try to be healthy and hope that it inspires him to do the same."

Eric says that what inspired him to get his condition under control was even simpler: "Ultimately, the willingness to change had to come from me." 🍌

4 WAYS TO OFFER SUPPORT

WITHOUT TICKING OFF YOUR SPOUSE

1. Let your partner take the lead.

Many spouses of people with diabetes never ask what that person wants—they just jump right into helping. But any healthy partnership has to start with listening to the person with the diagnosis. Ask, "How can I offer support effectively?"

2. Go undercover.

If your partner shuns advice and hand-holding but you

still want to help, try some low-key ways to make your life together healthier. You can go with your spouse to the doctor, ban processed carbs from your shopping list, or find a physical activity you both enjoy and suggest doing it together.

3. Take small steps.

Instead of trying to overhaul your spouse's entire way of eating, which is overwhelming, think of small changes

you can make together, like having eggs for breakfast instead of cereal.

4. Live the life you want your partner to live.

If you wish your spouse would exercise, pencil in a gym date for yourself—and keep it. If you worry about a partner's alcohol consumption, limit your own wine intake. You'll end up being a role model for your spouse and the rest of your family.

Can Your Pet Skip the Shots?

Educate yourself on the actual risks of animal vaccines and keep your pet safe.

BY STEPHANIE ECKELKAMP

Some pet owners, like some parents, worry about the safety of vaccines.



Most dogs and cats are given routine vaccinations to immunize them against a myriad of diseases. Today, more pet owners have grown concerned about potential side effects. Some vets share the concern, but many say the “anti-vax” mentality can be deadly. Learn how to make the right choice for your pet.

The True Risks of Pet Vaccines

“Vaccines save more lives than they harm,” says Susan Nelson, an associate clinical professor of veterinary medicine at Kansas State University, who says a pet’s risk of an adverse reaction is less than 1%. Most side effects are mild, including fatigue, low-grade fever, and decreased appetite. But severe reactions—facial swelling, hives, or anaphylaxis—do occur, and the risk rises with the number of vaccines given in a visit. Though uncommon, vaccine-induced sarcomas (cancerous tumors) can develop at the injection site. “I’ve seen animals experience seizures and develop autoimmune disorders,” says Barbara Royal, a Chicago-based holistic veterinarian. Although she does administer vaccines, Royal thinks many pets are being overvaccinated.

The Smart Way to Keep Pets Healthy

Consider your pet’s risk factors to determine which vaccines are necessary. Has your dog had a bad reaction to a past vaccine, or is his immune system compromised? If so, ask your vet about an annual blood test called a titer that can determine whether your pet already has immunity against certain diseases (usually from a past vaccination). If positive, you can skip the vaccine that year. You can further reduce your pet’s risk of adverse effects by giving him an antihistamine before a vaccine (your vet will decide the dose). And you can ask your vet to provide vaccines several weeks apart if possible.

HOW TO CALL THE SHOTS

Some vaccines are necessary for your pet; others are less essential.

Can Almost Never Skip

Rabies vaccine is mandated by law in most states, annually or every 3 years, depending on where you live. But if your pet has had a bad reaction to the vaccine in the past or is very ill, you may qualify for a rabies waiver. Check with your vet to see if that’s an option.

Can Sometimes Skip

Guidelines suggest that certain “core” vaccines—parvovirus, adenovirus, and distemper for dogs; parvovirus, calicivirus, and herpesvirus for cats—be given to all adult pets every 3 years. But these shots can sometimes be skipped if your pet is considered to be at high risk of having an adverse reaction or if he has a positive titer test.

Can Often Skip

“Noncore” vaccines are recommended only for pets deemed high-risk by your vet based on lifestyle and location. For dogs, these include Lyme, bordetella, parainfluenza, and leptospirosis; for cats, feline leukemia, feline AIDS, and bordetella. No risk? Skip the shot.

Thanks for Everything

An attitude of gratitude is helpful for mental health.

BY DANIEL GALEF



Show Us Your Art

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GRATITUDE, IT has been said, can do wonders for your health. Recent research holds that a thankful attitude can improve sleep and self-esteem, reduce pain, alleviate anxiety and depression, and increase your overall satisfaction with life. This season, let appreciation color your world.

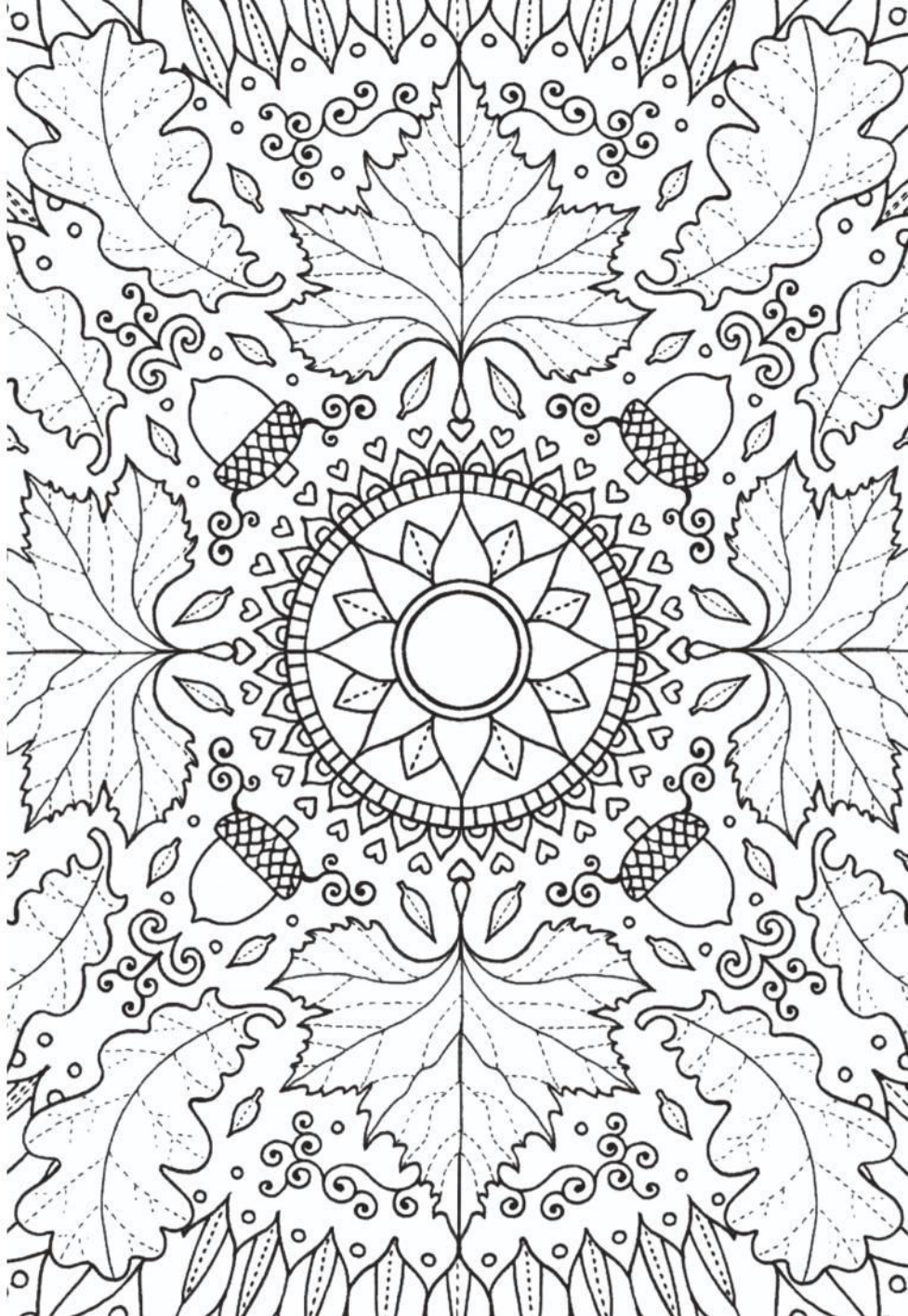
While you work on the design at right, consider all

that you're grateful for. That mental exercise requires an almost meditative focus that will enhance your creativity. When you're finished coloring, write down your thankful thoughts. Studies suggest that keeping a gratitude journal and writing about positive experiences can amplify happiness and optimism.

Here, we'll start: We're thankful for you!

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CALEB THAL/STOCKSY. ILLUSTRATION BY ANASTASIA CATRIS



The background of the page is a dark, heavily textured wooden surface, possibly a cutting board or a table, showing numerous scratches and grain patterns. Scattered around the text are several apples. In the top left, a red apple with some yellowing is visible. In the bottom left, a metal bowl holds three apples: two red and one green that has been cut in half, revealing its white core. To the right of the bowl, there's a greenish-yellow pear. Further right, another red apple is partially visible. In the bottom right corner, another red apple is shown. The text is centered in the upper half of the image.

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